10/25/2019 09:50

PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) W.R. GRACE & CO. POLITICAL ACTION COMMITTEE (GRACEPAC) 7500 GRACE DRIVE ADDRESS (number and street) (Check if address is changed) **COLUMBIA** 21044 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS hana.kaibni@grace.com (Check if address is changed) Optional Second E-Mail Address robin@sextonpac.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00594127 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Kaibni, Hana, , , Type or Print Name of Treasurer Kaibni, Hana, , , [Electronically Filed] 10 25 2019 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Only

Toll Free 800-424-9530 Local 202-694-1100

TYPE OF COMMITTEE Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate information below.) (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.) Name of Candidate Party Affiliation Office Sought: House Senate President Distr (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee:	e
Candidate Committee: (a) This committee is a principal campaign committee. (Complete the candidate information below.) (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.) Name of Candidate Candidate Party Affiliation Office Sought: House Senate President Distr (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Party Committee:	e
(a) This committee is a principal campaign committee. (Complete the candidate information below.) (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.) Name of Candidate Party Affiliation Office Sought: House Senate President Distr (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Party Committee:	e
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.) Name of Candidate Party Affiliation Office Sought: House Senate President Distr (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Party Committee:	e
information below.) Name of Candidate Candidate Party Affiliation Candidate Party Affiliation Candidate President Distr Committee supports/opposes only one candidate, and is NOT an authorized committee. Party Committee:	e
Candidate Party Affiliation Candidate Party Affiliation Candidate Party Affiliation Candidate President Distr Candidate Candidate President Distr Candidate President Distr Candidate Party Committee:	
Party Affiliation Sought: House Senate President Distr (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee:	
Name of Candidate Party Committee:	
Candidate Party Committee:	
(National State (Democra	
	atic, an, etc.) Party.
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	rganization is a
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Cooper	ative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, at least one of which is an authorized committee of a federal candidate.	e political
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.	e political
Committees Participating in Joint Fundraiser	
1.	
2.	
3.	
4.	

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V	Vrite or Type Committee Nam	ne e	
١	W.R. GRACE 8	CO. POLITICAL ACTION COMMITTEE (C	RACEPAC)
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leader	rship PAC Sponsor
٧	V.R. Grace & Co.		
	Mailing Address	7500 Grace Drive	
		Columbia MD 21044	
		CITY STATE	ZIP CODE
	Relationship: X Connecte	ed Organization Affiliated Committee Joint Fundraising Representative L	eadership PAC Sponsor
·.	Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in position	ossession of committee
	Kaibni, H	ana, , ,	1
	Mailing Address	7500 Grace Drive	
	,		
		Columbia MD 21044	
	Title or Position	CITY STATE	ZIP CODE
	Custodian of Record		531 - 8214
3.	Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the rassistant treasurer).	name and address of
	Full Name Kaibni, Ha	ana, , ,	
	Mailing Address	7500 Grace Drive	
		Columbia MD 21044	
	Title or Position	CITY STATE	ZIP CODE
	Treasurer		531

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Full Name of Designated Agent	Lin, Ridwan, , ,		1 1 1 1 1	1 1 1 1	
	7500 Grace Drive				
Mailing Address					
			MD	24044	
	Columbia		MD	21044	
T91 B 91	(CITY	STATE	Z	IP CODE
Title or Position Assistant Treas	rer	Tolonhono nu	umbor 41	0 _ 53	81 8755
		Telephone nu			
Banks or Other safety deposit be Name of Bank, I		depositories in which the commi	ntee deposits it	mas, notas	accounts, rems
safety deposit be Name of Bank, I	ces or maintains funds.	depositories in which the commi	intee deposits it		
safety deposit bo	epository, etc. Bank of America	depositories in which the commi	litee deposits to		
safety deposit be Name of Bank, I	Bank of America 100 N Tryon Street	depositories in which the commi			
safety deposit be Name of Bank, I	epository, etc. Bank of America	depositories in which the commi	NC	28202	
safety deposit be Name of Bank, I	Bank of America 100 N Tryon Street Charlotte	city		28202	IIP CODE
safety deposit be Name of Bank, I	Bank of America 100 N Tryon Street Charlotte		NC NC	28202	
safety deposit be Name of Bank, I	Bank of America 100 N Tryon Street Charlotte epository, etc.	CITY	NC NC STATE	28202 	IP CODE
safety deposit be Name of Bank, I	Bank of America 100 N Tryon Street Charlotte	CITY	NC NC STATE	28202 	IP CODE
safety deposit be Name of Bank, I	Bank of America 100 N Tryon Street Charlotte epository, etc.	CITY	NC NC STATE	28202 	IP CODE
Name of Bank, I	Bank of America 100 N Tryon Street Charlotte epository, etc.	CITY	NC NC STATE	28202 	IP CODE
Name of Bank, I	Bank of America 100 N Tryon Street Charlotte epository, etc.	CITY	NC NC STATE	28202 	IP CODE