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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) ARKEMA INC POLITICAL ACTION COMMITTEE 900 FIRST AVE ADDRESS (number and street) (Check if address is changed) KING OF PRUSSIA 19406 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS ryan.collins@arkema.com (Check if address is changed) Optional Second E-Mail Address ryan.collins@arkema.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 02 2019 C00182980 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. Collins, Ryan, , , Type or Print Name of Treasurer Collins, Ryan, , , [Electronically Filed] 03 20 2020 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) Toll Free 800-424-9530 Only

Local 202-694-1100

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	COMMITTEE  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 candidate information below.)				
Name of Candidate					
Candidate Party Affiliat	Office Sought: House Senate President	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Cor		Democratic,			
(d)		Republican, etc.) Party.			
Political A	action Committee (PAC):				
(e) <b>x</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a			
	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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 Fund	draising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political			
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political			
Com	mittees Participating in Joint Fundraiser				
1.	FEC ID number				
2.	FEC ID number				
3.	FEC ID number				
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Write or Type Committee Na	nme		
ARKEMA INC	POLITICAL ACTION	N COMMITTEE	
6. Name of Any Connected	d Organization, Affiliated Committee, Je	oint Fundraising Representat	ive, or Leadership PAC Sponsor
Arkema Inc			
Mailing Address	900 FIRST AVENUE		
	KING OF PRUSSIA	PA	19406 
	CITY	STATE	ZIP CODE
Relationship: x Connec	cted Organization Affiliated Committee	Joint Fundraising Represe	entative Leadership PAC Sponsor
<ol> <li>Custodian of Records: le books and records.</li> </ol>	dentify by name, address (phone number	optional) and position of the	e person in possession of committee
	Ryan, , ,		
Full Name	900 First Avenue		
Mailing Address			
	10 15 1		10406
	King of Prussia	PA PA	19406
Title or Position	CITY	STATE	ZIP CODE
Director Finance		Telephone number	610 - 205 - 7870
Treasurer: List the name any designated agent (e.g.)	and address (phone number optional) ., assistant treasurer).	of the treasurer of the commit	tee; and the name and address of
Full Name Collins, of Treasurer	Ryan, , ,		
Mailing Address	900 First Avenue		
	King of Prussia	PA	19406
	CITY	STATE	ZIP CODE
Title or Position Director Finance		Telephone number	610 - 205 - 7870

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Full Name of Designated H Agent	Hamel, William, , ,	<u>, , , , , , , , , , , , , , , , , , , </u>				
Mailing Address	900 First Ave					
	King of Prussia PA 19406 CITY STATE	ZIP CODE				
Title or Position General Counsel		205				
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.						
Mailing Address	PNC BANK  249 FIFTH AVE					
Ç	PITTSBURGH PA 15222					
	CITY STATE	ZIP CODE				
Name of Bank, De	pository, etc.					
L						
Mailing Address						