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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration ☐ 1. Effective Date of Registration 5/1/2004

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name INVISTA

Address 655 15th Street NW Suite 415

City Washington State DC Zip 20005

4. Principal place of business (if different from line 3)
City Wichita State/Zip (or Country) KS

5. Telephone number and contact name
(202) 879-8500 Contact Robert Hall E-mail (optional) rob.ha

6. General description of registrant's business or activities
Integrated polymers, intermediates and fibers business

CLIENT

A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should c

labeled "Self" and proceed to line 10. ☑ *Self*

7. Client name

Address

City State Zip

8. Principal place of business (if different from line 7)
City State/Zip (or Country)

9. General description of client's business or activities

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If an in this section has served as a "covered executive branch official" or "covered legislative branch official" within tw acting as a lobbyist for the client, *state the executive and/or legislative position(s) in which the person served.*

Name	Covered Official Position (if applicable)
Robert P. Hall III	

Registrant Name INVISTA Client Name

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1

APP CHM ENV TAX TRD

12. Specific lobbying issues (current and anticipated)

International tax issues
International trade issues
Chemical security issues

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than $10,000 to the lobbying activities of the re
a semiannual period **and** in whole or in major part plans, supervises or controls the registrant's lobbying activ

☑ No ⇨ Go to line 14. ☐ Yes ⇩ Complete the rest of this section for each entity matcl criteria above, then proceed to line 14.

Name	Address	Principal Place of Bu (city and state or cou

FOREIGN ENTITIES

14. Is there any foreign entity that:

a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **or**
b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or sub activities of the client or any organization identified on line 13; **or**
c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the c of the lobbying activity?

☑ No ⇨ Sign and date the registration. ☐ Yes ⇩ Complete the rest of this section for e matching the criteria above, then sign registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature Date 08/16/20

Signature _____ Date _____

Printed Name and Title Robert P. Hall III, Managing Director, Government Affairs

Form LD-1 (Rev. 04/03)