MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

| The MPAC Instruction | Guide explains how to complete this forn | 1 Filer ID (Ethics Commission Filers) 00081723 | 2 Total pages filed:6 |
|---|--|--|--|
| 3 COMMITTEE NAME | OFFICE USE ONLY | | |
| Ryder System, Inc. Employees Political Action Committee | | | Date Received |
| | | | |
| | | | ELECTRONICALLY FILED |
| | 1 | | 02/05/2025 |
| 4 COMMITTEE ADDRESS | ADDRESS / PO BOX; APT / SUITE #; | CITY; STATE; ZIP | |
| ADDITESS | 6000 Windward Parkway | | |
| | | | |
| Change of Address | Alpharetta, GA 30005 | | Date Hand-delivered or Date Postmarked |
| 5 CAMPAIGN | MS / MRS / MR FIRST | MI | |
| TREASURER NAME | Ms. Cristin | a | Receipt # Amount |
| | | | |
| | | 0.155 | Date Processed |
| | NICKNAME LAST | SUFFI | |
| | Gallo- | Aquino | Date Imaged |
| | | | |
| 6 CAMPAIGN TREASURER | STREET ADDRESS (NO PO BOX PLEAS | E); APT / SUITE #; CITY; S | TATE; ZIP CODE |
| STREET | 2333 Ponce de Leon Blvd | | |
| ADDRESS (Residence or Business) | Suite 700 | | |
| (Residence of Business) | Coral Gables, FL 33134 | | |
| 7 CAMPAIGN | STREET ADDRESS OR PO BOX; | APT / SUITE #; CITY; S | TATE; ZIP CODE |
| TREASURER | 6000 Windward Parkway | | |
| MAILING ADDRESS | | | |
| Change of Address | Alpharetta, GA 30005 | | |
| 8 CAMPAIGN | AREA CODE PHONE NUMBER | R EXTENSION | |
| TREASURER PHONE | (305) 500-4290 | | |
| | | | |
| 9 REPORT TYPE | X Monthly | 🗂 10th day after campaign | Dissolution (Attach PAC-DR) |
| | | L treasurer termination | |
| 10 MONTHLY | | anil 5 🗖 hubu 5 | |
| REPORT FILING DEADLINE | January 5 | pril 5 🛛 🗌 July 5 | October 5 |
| | X February 5 | 1ay 5 August 5 | November 5 |
| | March 5 J | une 5 September 5 | December 5 |
| | | | |
| | Month Day Year | THROUGH | • |
| COVERED | 12/26/2024 | 01/25 | /2025 |
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| | | | |
| | G | O TO PAGE 2 | |
| Forms provided by Te | xas Ethics Commission www | v.ethics.state.tx.us | Version V4.1.0.5dd2ace2 |

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---|---|--|-----------------------------------|--|
| Ryder System, Inc. Em | ployees Political Action | Committee | 00081723 | 3 |
| 14 COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | |
| | | B. Opposed | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS M | POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$ | 0.00 |
| | 2. TOTAL POLITICA (OTHER THAN PLEI | L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 0.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 88.83 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL C OF THE REPORTING | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | DAY \$ | 115,022.04 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD | THE \$ | 0.00 |
| 16 AFFIDAVIT | | | | |
| | | I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code. | rjury, that the mation require | accompanying report is d to be reported by me |
| | | Ms. Cristina | Gallo-Aquin | 0 |
| | | Signature of Ca | mpaign Treas | urer |
| AFFIX NOTARY | STAMP / SEAL ABOVE | | | |
| | | , ti | nis the | day |
| of | _, 20, to certify v | vhich, witness my hand and seal of office. | | |
| Signature of officer ad | lministering oath | Printed name of officer administering oath | Title of off | icer administering oath |
| Forms provided by Texas E | Ethics Commission | www.ethics.state.tx.us | | Version V4.1.0.5dd2ace2 |

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3 3 of 6

| 17 COM Ryde | MITTE er Sys | (Ethics Co | mmission Filers) | | | | |
|----------------|---|--|------------------|----|-------|--|--|
| 19 SCH | EDULE E OF \$ | SUBT | OTAL AMOUNT | | | | |
| 1. | Х | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ | 0.00 | | |
| 2. | Х | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | | \$ | 0.00 | | |
| 3. | Х | SCHEDULE B: PLEDGED CONTRIBUTIONS | | \$ | 0.00 | | |
| 4. | | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | R | \$ | | | |
| 5. | | SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION | ATION OR | \$ | | | |
| 6. | 6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | | | | | | |
| 7. | 7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | | | | | | |
| 8. | | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR | ORGANIZATION | \$ | | | |
| 9. | Х | SCHEDULE E: LOANS | | \$ | 0.00 | | |
| 10. | Х | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | S | \$ | 88.83 | | |
| 11. | Х | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ | 0.00 | | |
| 12. | Х | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION | ONS | \$ | 0.00 | | |
| 13. | Х | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ | 0.00 | | |
| 14. | | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | ONS | \$ | | | |
| 15. | | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED | \$ | | | |
| | | | | • | | | |
| | | | | | | | |
| | | | | | | | |

PLEDGED CONTRIBUTIONS

SCHEDULE **B**

| The Instruction Guide explains how to complete this form. | | | 1 Total pages Schedule B: Sch: 1/1 Rpt: 4/6 | | | | | | |
|---|---|-------------------------|--|----------|-------------------------------------|-----------------------|--------------------------------|--|-----------|
| 2 | 2 FILER NAME | | | 3 | Filer ID (Ethics Commission Filers) | | | | |
| | Ryder System, Inc. Employees Political Action Committee | | | 00081723 | | | | | |
| 4 | TOTAL OF | UNITEMIZED PLEDGES | | | | \$ | | | 0.00 |
| 5 | Date | 6 Full name of pledgor | out-of-state PAC (ID#:_ |) | 8 | Amount of pledge (\$) | 9 | In-kind description (If applicable) | |
| | | 7 Pledgor Address; City | /; State; Zip Code | | | Check if trave | I I I I el outside | of Texas. Complete Sch | iedule T. |
| 10 Principal occupation / Job title (See Instructions) | | 11 Employer (See Instru | ctio | ns) | | | | | |

| LOANS | | SCHEDULE | E |
|--|-------------------------------|--|------|
| The Instruction Guide explains how to complete this form. | ges Schedule E: 1 Rpt: 5/6 | | |
| 2 FILER NAME Ryder System, Inc. Employees Political Action Committee | 3 Filer ID 000817 | (Ethics Commission Filers | 3) |
| ⁴ TOTAL OF UNITEMIZED LOANS | I | \$ | 0.00 |
| 5 Date of loan 7 Name of lender out-of-state PAC (ID#: |) | 9 Loan Amount (\$) | |
| 6 Is lender a financial institution? 8 Lender address; City; State; Zip Code | | 10 Interest Rate | |
| | | 11 Maturity Date | |
| 12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions) | 5) | | |
| 14 Description of Collateral 15 Check if personal funds we None | ere deposited | d into political account (See Instructions) | |
| 16 GUARANTOR 17 Name of guarantor INFORMATION | | 19 Amount Guaranteed (\$ | ;) |
| not applicable 18 Guarantor address; City; State; Zip Code | | | |
| | | | |
| 20 Principal occupation 21 Employer (See Instructions) | 6) | | |
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 6/6 Ryder System, Inc. Employees Political Action Committee 00081723 4 Date 5 Payee name 01/10/2025 CA Secretary of State 6 Amount (\$) 7 Payee address; City; State; Zip Code \$50.00 PO Box 1467 Expenditure from Sacramento, CA 95812-1467 corporate funds 8 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Fees EXPENDITURE Check if Austin, TX, officeholder living expense PAC Registration Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held 9 expenditure to benefit C/OH Date Payee name 01/14/2025 Comerica Bank Amount (\$) Payee address; City; State; Zip Code \$38.83 PO Box 75000 Expenditure from Detroit, MI 48275-0001 corporate funds PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking EXPENDITURE Check if Austin, TX, officeholder living expense Bank Fee Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1