MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00081723 2 Total pages filed: 9					
3 COMMITTEE NAME			OFFICE USE ONLY		
Ryder System, Inc					
, , , , , , , , , , , , , , , , , , , ,					
			04/02/2025		
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP			
7.001(E00	6000 Windward Parkway				
	Alpharetta, GA 30005		Date Hand-delivered or Date Postmarked		
5 CAMPAIGN TREASURER	MS / MRS / MR FIRST	MI	-		
NAME	Ms. Cristina		Receipt # Amount		
			Date Processed		
	NICKNAME LAST	SUFFI	Date Processed		
	Gallo-Ac		Date Imaged		
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE)	; APT / SUITE #; CITY; ST	ATE; ZIP CODE		
TREASURER	2333 Ponce de Leon Blvd	· · · · · · · · · · · · · · · · · · ·	·		
STREET ADDRESS	Suite 700				
(Residence or Business)	Coral Gables, FL 33134				
7 CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE		
MAILING	6000 Windward Parkway				
ADDRESS					
	Alpharetta, GA 30005				
8 CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION			
TREASURER PHONE	(305) 500-4290				
9 REPORT TYPE	X Monthly	10th day after campaign	Dissolution (Attach PAC-DR)		
		L treasurer termination			
10 MONTHLY			October 5		
REPORT FILING DEADLINE	January 5 X Apri	I 5 July 5			
	February 5 May	August 5	November 5		
	March 5 Jun	e 5 September 5	December 5		
	Month Day Year	Month THROUGH	Day Year		
COVERED	02/26/2025	03/25/	2025		
	GO TO PAGE 2				
Forms provided by Te	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.e02d6221				

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. Emp	oloyees Political Action	Committee	00081723	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
(Attach lists on plain		B. Opposed		
paper to complete this report if necessary.)				
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders			
	Assisted (Identify by name or, if			
	applicable, classify by party.)			
15 CONTRIBUTION TOTALS) POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR	\$	0.00
		ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA	·	\$	07 500 00
L	(OTHER THAN PLEI	DGES, LOANS, OR GUARANTEES OF LOANS)	Ψ	27,500.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	54.48
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	142,428.52
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT				
10 AFFIDAVII				
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
			Gallo-Aquino	
		Signature of Ca	mpaign Treası	Irer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, ti	nis the	day
		which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath
	thice Commission			
Forms provided by Texas E	tnics Commission	www.ethics.state.tx.us		Version V4.1.0.e02d6221

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				0.0.0
17 COMMITTEE NAME18 Filer IDRyder System, Inc. Employees Political Action Committee00081723				ommission Filers)
19 SCHEDUL NAME OF	SUE	STOTAL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	27,500.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
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. X SCHEDULE E: LOANS		\$	0.00	
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$	54.48	
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00	
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS		\$		
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

				_		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/9	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
		m, Inc. Employees Political Action Committee			00081723	· · ·
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	02/28/2025	Diez, John				\$5,000.00
		6 Contributor address; City; State; Zip Code				
	l					
	I					
		Coral Gables, FL 33134-5427				
8		ipation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	President &	COO	Ryder System, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/28/2025	Fatovic, Robert				\$5,000.00
	1	Contributor address; City; State; Zip Code				
	l					
	I					
		Coral Gables, FL 33134-5427				
Γ		ipation / Job title (See Instructions)	Employer (See Instructions	;)		
	EVP, Chief L	Legal Officer & Corp Secretary	Ryder System, Inc.			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/28/2025	Gallo-Aquino, Cristina				\$1,000.00
		Contributor address; City; State; Zip Code				
	I					
	I					
		Coral Gables, FL 33134-5427				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	EVP and CF	0	Ryder System, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	02/28/2025	Havens, Tom				\$1,000.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
		Coral Gables, FL 33134-5427				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
L	President, H	leet Management Solutions	Ryder System, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/28/2025	Hodes, Sanford				\$3,000.00
	I	Contributor address; City; State; Zip Code				
	I					
	I					
L		Coral Gables, FL 33134-5427				
		upation / Job title (See Instructions)	Employer (See Instructions	;)		
	SVP, Chiet E	Development Officer	Ryder System, Inc.			

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/9			
- -	FILER NAME			2	Filer ID (Ethics Commissio	n Filers)
ľ		tem, Inc. Employees Political Action Committee		5	00081723	
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	02/28/2025	Jones, Karen				\$1,000.00
		6 Contributor address; City; State; Zip Code				
		Coral Gables, FL 33134-5427				
8		pation / Job title (See Instructions)	9 Employer (See Instructions)		
	EVP, Chief M	Narketing Officer	Ryder System, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/28/2025	Lopez, Frank				\$1,000.00
		Contributor address; City; State; Zip Code				
		Coral Gables, FL 33134-5427				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	EVP & Chief	Human Resources Officer	Ryder System, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	02/28/2025	Martin, Stephen				\$1,000.00
		Contributor address; City; State; Zip Code				
		Coral Gables, FL 33134-5427				
		pation / Job title (See Instructions)	Employer (See Instructions)		
	EVP, Transp	ortation Solutions	Ryder System, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/28/2025	Ravindran, Rajeev				\$1,000.00
		Contributor address; City; State; Zip Code				
		Coral Gables, FL 33134-5427				
		pation / Job title (See Instructions)	Employer (See Instructions)		
	EVP & Chief	Information Officer	Ryder System, Inc.			
Γ	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	02/28/2025	Sanchez, Robert				\$5,000.00
	Contributor address; City; State; Zip Code					
		Coral Gables, FL 33134-5427				
		pation / Job title (See Instructions)	Employer (See Instructions)		
	Chairman & CEO Ryder System, Inc.					

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/3 Rpt: 6/9 2 FILER NAME Filer ID (Ethics Commission Filers) 3 Ryder System, Inc. Employees Political Action Committee 00081723 5 Full name of contributor Amount of Contribution (\$) 4 Date out-of-state PAC (ID#: 7 02/28/2025 \$2,500.00 Sensing, John 6 Contributor address; City; State; Zip Code Coral Gables, FL 33134-5427 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) President, Supply Chain Solutions Ryder System, Inc. Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 02/28/2025 \$1,000.00 Wellman, Sarah Contributor address; City; State; Zip Code Coral Gables, FL 33134-5427 Principal occupation / Job title (See Instructions) Employer (See Instructions) Senior Director Corporate Affairs Ryder System, Inc.

PLEDGED CONTRIBUTIONS

SCHEDULE **B**

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

LOANS			SCHEDU	JLE E
I The Instruction Guide explains how to complete this form			ges Schedule E: 1 Rpt: 8/9	
2 FILER NAME Ryder System, Inc. Employees Political Action Committee		iler ID 00817	(Ethics Commissio 23	n Filers)
⁴ TOTAL OF UNITEMIZED LOANS			\$	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 Rate11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instruction)	s)			
14 Description of Collateral 15 Check if personal funds w None	ere de	posited	into political accoun (See Instruction	
Instruction Instruction 16 GUARANTOR 17 Name of guarantor INFORMATION			19 Amount Guaran	teed (\$)
not applicable 18 Guarantor address; City; State; Zip Code				
20 Principal occupation 21 Employer (See Instruction)	s)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel Out of District I Committee Legal Services Palaries/Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1: Sch: 1/1 Rpt: 9/9	2 FILER NAME 3 Filer ID (Ethics Commission Filers) Ryder System, Inc. Employees Political Action Committee 00081723
4 Date	5 Payee name
03/13/2025	Comerica Bank
6 Amount (\$) \$54.48	7 Payee address; City; State; Zip Code PO Box 75000
Expenditure from corporate funds	Detroit, MI 48275-0001
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Bank Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held