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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) ZF Automotive US, Inc. Political Action Committee (A/K/A ZF Automotive US PAC) 12001 Tech Center Drive ADDRESS (number and street) (Check if address is changed) Livonia 48150-2122 MI CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Sarah.Kirkwood@zf.com (Check if address is changed) Optional Second E-Mail Address |dyeung@blankrome.com| COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2021 C00025536 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. Kirkwood, Sarah, , , Type or Print Name of Treasurer Kirkwood, Sarah, , , [Electronically Filed] 05 2021 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

| ı | FEC Fo i | rm 1 (Revised 02/2009) | Page 2 |
|-------------|-------------------------|---|-------------------------|
| | | OMMITTEE 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. (Con information below.) | nplete the candidate |
| Nam Cand | e of didate | | |
| | didate / Affiliation | Office Sought: House Senate President | State |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| Name | e of didate | | |
| Par | ty Con | nmittee: (National, State | (Democratic, |
| (d) | | This committee is a or subordinate) committee of the | Republican, etc.) Party |
| Poli | tical A | ction Committee (PAC): | |
| (e) | × | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co | nnected organization is |
| | | 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 s committee. (i.e., nonconnected committee) | egregated 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.) | |
| Join | t Fund | raising Representative: | |
| (g) | П | This committee collects contributions, pays fundraising expenses and disburses net proceeds for t | |
| | | committees/organizations, at least one of which is an authorized committee of a federal candidate. | |
| (h) | | This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate. | wo or more political |
| | Com | mittees Participating in Joint Fundraiser | |
| | 1. | FEC ID number | |
| | 2. | | |
| | 3. | | |
| | | | |
| | 4. | | |

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|---|---------------------|
| Write or Type Committee Name | <u>g</u> c u |
| ZF Automotive US, Inc. Political Action Committee (A/K/A ZF Automotive U | IS PAC) |
| | |
| 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC | Sponsor |
| ZF Automotive US, Inc. | |
| | |
| 12001 Tech Center Drive | |
| Mailing Address | |
| Liyonia , , , , , , , , , , , MI 48150-2122 | |
| | · |
| CITY STATE ZIP CO | DE |
| Relationship: x Connected Organization Affiliated Committee Joint Fundraising Representative Leadership | PAC Sponsor |
| | |
| . Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession books and records. | of committee |
| Kirkwood, Sarah, , , | 1 |
| Full Name | |
| Mailing Address | |
| | |
| Livonia MI 48150 | |
| Title or Position CITY STATE ZIP COI | DE |
| Treasurer 734 - 855 - < | 3539 |
| 3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and any designated agent (e.g., assistant treasurer). | address of |
| Full Name Kirkwood, Sarah, , , | |
| of Treasurer | |
| Mailing Address 12001 Tech Center Drive | |
| | |
| Livonia MI48150 | |
| CITY STATE ZIP COIL Title or Position | DE |
| Treasurer 734 - 855 - Telephone number | 3539 |

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|--|--|---------------------|
| | | |
| Full Name of | | |
| Designated Agent | | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Title or Position | | |
| | Telephone number | |
| safety deposit b | r Depositories: List all banks or other depositories in which the committee deposits funds, ho oxes or maintains funds. | lds accounts, rents |
| Banks or Other safety deposit b Name of Bank, Mailing Address | Depository, etc. Comerica PO BOX 75000 | |
| safety deposit b Name of Bank, | Depository, etc. Comerica PO BOX 75000 | |
| safety deposit b Name of Bank, | Depository, etc. Comerica PO BOX 75000 | |
| safety deposit b Name of Bank, | Depository, etc. Comerica PO BOX 75000 Detroit MI 48275 | |
| safety deposit b Name of Bank, Mailing Address | Depository, etc. Comerica PO BOX 75000 Detroit MI 48275 | |
| safety deposit b Name of Bank, Mailing Address | Depository, etc. Comerica PO BOX 75000 Detroit MI 48275 | |
| safety deposit b Name of Bank, Mailing Address | Depository, etc. Comerica PO BOX 75000 Detroit CITY STATE Depository, etc. | |
| safety deposit b Name of Bank, Mailing Address Name of Bank, | Depository, etc. Comerica PO BOX 75000 Detroit CITY STATE Depository, etc. | |
| safety deposit b Name of Bank, Mailing Address Name of Bank, | Depository, etc. Comerica PO BOX 75000 Detroit CITY STATE Depository, etc. | |