| Fill in this information to identify the case: |                              |   |  |  |
|--|------------------------------|---|--|--|
| Debtor   | Garrett Motion Inc.          |   |  |  |
| United States Ba                               | District of New York (State) |   |  |  |
| Case number                                    | 20-12212                     | _ |  |  |

## Official Form 410

Proof of Claim 04/19

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

**Filers must leave out or redact** information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

| P  | Identify the Clair   | dentify the Claim  |   |  |  |  |
|----|--|--|---|--|--|--|
| 1. | Who is the current creditor?   | Anthony Wilson  Name of the current creditor (the person or entity to be paid for this claim)  Other names the creditor used with the debtor |   |  |  |  |
| 2. | Has this claim been acquired from someone else?                                | ✓ No  Yes. From whom?  |   |  |  |  |
| 3. | Where should notices and payments to the creditor be sent?                     | Where should notices to the creditor be sent?  | Where should payments to the creditor be sent? (if different) |  |  |  |
|    |  | See summary page   | ,   |  |  |  |
|    | Federal Rule of<br>Bankruptcy Procedure<br>(FRBP) 2002(g)                      |  |   |  |  |  |
|    |  | Contact phone _+44 7825100327  | Contact phone   |  |  |  |
|    |  | Contact email See summary page Contact email   |   |  |  |  |
|    |  | Uniform claim identifier for electronic payments in chapter 13 (if you use one):   |   |  |  |  |
| 4. | Does this claim amend one already filed?                                       | <ul><li>✓ No</li><li>✓ Yes. Claim number on court claims registry (if known)</li></ul>   | Filed on  |  |  |  |
| 5. | Do you know if<br>anyone else has filed<br>a proof of claim for<br>this claim? | No Yes. Who made the earlier filing?   |   |  |  |  |

Official Form 410 Proof of Claim

| Part 2: | Give | Information | 4 |
|---------|------|-------------|---|

## Give Information About the Claim as of the Date the Case Was Filed

| 6.  | Do you have any number you use to identify the debtor? | ☑ No  |  |  |
|-----|--|---|--|--|
|     |  | Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:  |  |  |
| 7.  | How much is the claim?                                 | Does this amount include interest or other charges?  No   |  |  |
|     |  | Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).   |  |  |
| 8.  | What is the basis of the claim?                        | Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  Limit disclosing information that is entitled to privacy, such as health care information.  |  |  |
|     |  | Shareholder   |  |  |
| 9.  | Is all or part of the claim secured?                   | No   Yes. The claim is secured by a lien on property.   Nature or property:   Real estate: If the claim is secured by the debtor's principle residence, file a Mortgage Proof of Claim Attachment (Official Form 410-A) with this Proof of Claim.   Motor vehicle   Other. Describe:   Basis for perfection:   Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)    Value of property: |  |  |
| 10. | Is this claim based on a                               | ☐ Variable  |  |  |
|     | lease?   | Yes. Amount necessary to cure any default as of the date of the petition.   |  |  |
| 11. | Is this claim subject to a right of setoff?            | ✓ No  ☐ Yes. Identify the property:   |  |  |

Official Form 410 **Proof of Claim** 

| 12. Is all or part of the claim   | <b>☑</b> No   |  |                                       |  |
|---|---|--|---------------------------------------|--|
| entitled to priority under 11 U.S.C. § 507(a)?  | Yes. Check  | k all that apply:  | Amount entitled to priority           |  |
| A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount   |   | stic support obligations (including alimony and child support) under S.C. § 507(a)(1)(A) or (a)(1)(B).   | \$                                    |  |
|   |   | \$3,025* of deposits toward purchase, lease, or rental of property vices for personal, family, or household use. 11 U.S.C. § 507(a)(7).  | \$                                    |  |
| entitled to priority.   | days b  | s, salaries, or commissions (up to \$13,650*) earned within 180 pefore the bankruptcy petition is filed or the debtor's business ends ever is earlier. 11 U.S.C. § 507(a)(4).  | \$                                    |  |
|   | Taxes   | or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).  | \$                                    |  |
|   | ☐ Contri  | butions to an employee benefit plan. 11 U.S.C. § 507(a)(5).  | \$                                    |  |
|   | Other.  | . Specify subsection of 11 U.S.C. § 507(a)() that applies.   | \$                                    |  |
|   | * Amounts a   | are subject to adjustment on 4/01/22 and every 3 years after that for cases begu   | n on or after the date of adjustment. |  |
| 13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)?  | Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.  \$ |  |                                       |  |
|   |   |  |                                       |  |
| Part 3: Sign Below  |   |  |                                       |  |
| The person completing this proof of claim must sign and date it. FRBP 9011(b).  If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.  A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.  18 U.S.C. §§ 152, 157, and 3571. | I am the trust I am a guarar I understand that a the amount of the o I have examined the I declare under per Executed on date   | itor.  itor's attorney or authorized agent.  ee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.  Intor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.  In authorized signature on this <i>Proof of Claim</i> serves as an acknowle claim, the creditor gave the debtor credit for any payments received the information in this <i>Proof of Claim</i> and have reasonable belief that the nalty of perjury that the foregoing is true and correct.   101/27/2021  MM / DD / YYYY | oward the debt.                       |  |
| /s/Anthony Wilson Signature  Print the name of the person who is completing and signing this claim:   |   |  |                                       |  |
|   |   |  |                                       |  |
|   | Name  | Anthony Wilson First name Middle name Las  | t name                                |  |
| Title   |   |  |                                       |  |
|   | Company   | Identify the corporate servicer as the company if the authorized agent is a service  | er.                                   |  |
|   | Address   |  |                                       |  |
|   | Contact phone   | Email  |                                       |  |

Official Form 410 Proof of Claim