SEC Form 4

 \Box

FORM 4

1. Name and Address of Reporting Person*

Attestor Value Master Fund, LP

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APP	ROVAL				
OMB Number: 3235-0					
Estimated average burden					
hours per response	: 0.5				

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10% Owner

0.5

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5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

Garrett Motion Inc. [GTXMQ]

(Last) (First) (Middle) PO BOX 309, UGLAND HOUSE					3. Date of Earliest Transaction (Month/Day/Year) 06/11/2021								- Officer (give title Other (specify below) below)					
(Street) GRAND E9 KY1-1104 (City) (State) (Zip)				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person					
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y)			tion	n 2A. Deemed Execution Date,		3. 4. Securitie		f, or Benefic s Acquired (A) or f (D) (Instr. 3, 4 an		d Securit Benefic	5. Amount of		nership : Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
					ľ			Code	v	Amount	(A) or (D)	Price	Reporte Transae (Instr. 3	ction(s)			(Instr. 4)	
Common	Stock		06/11/2	2021						16,508	D	\$7.95	17 2,60)3,048		I	See footnote ⁽¹⁾	
Series A	Series A Preferred Stock 06/12			2021	121		S		25,000	D	\$8.3	7 4,58	,589,904			See footnote ⁽¹⁾		
		Ta	ble II - Deriva (e.g., p							posed of, convertib				d	1	1		
1. Title of Derivative Security (Instr. 3) 2. 3. Transaction Date (Month/Day/Year) Berivative Security		3A. Deemed Execution Date, if any (Month/Day/Year	Cod	ransaction code (Instr.		Number rivative curities quired or posed D) atr. 3, 4 I 5)	1		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivativ Securitie Beneficia Owned Followin Reported Transact (Instr. 4)	re es ally g	10. Ownersh Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership ct (Instr. 4)			
				Code	e V	(A)	(D)	Date	sisable	Expiration Date	Title	Amount or Number of Shares						
		f Reporting Person* Aaster Fund, 1						•				*	-					
(Last) PO BOX	(309, UGL	(First) AND HOUSE	(Middle)															
(Street) GRAND CAYMA		E9	KY1-1104		_													
(City)		(State)	(Zip)		_													
		f Reporting Person [*] F <mark>und GP Ltd</mark>																
(Last) PO BOX UGLAN	C 309 D HOUSE	(First)	(Middle)															
(Street) GRAND CAYMA		E9	KY1-1104															
(City)		(State)	(Zip)															
	nd Address o o <mark>r Capital</mark>	f Reporting Person [*] <u>Ltd</u>		_														

(Last)	(First)	(Middle)
PO BOX 309		
UGLAND HO	USE	
(Street)		
GRAND	E9	KY1-1104
CAYMAN		
(City)	(State)	(Zip)
1. Name and Add	ress of Reporting Person	*
Attestor Ltd	<u>l</u>	
(Last)	(First)	(Middle)
7 SEYMOUR	STREET	
(Street)		
LONDON	X0	W1H 7JW
(City)	(State)	(Zip)
1. Name and Add	ress of Reporting Person	*
Peters Jan-C		
		(Middle)
Peters Jan-C	Christoph (First)	
Peters Jan-C	Christoph (First) DR LIMITED	
Peters Jan-C (Last) C/O ATTESTC	Christoph (First) DR LIMITED	
Peters Jan-C (Last) C/O ATTESTC 7 SEYMOUR	Christoph (First) DR LIMITED	

Explanation of Responses:

1. These securities of Garrett Motion Inc. (the "Company") are beneficially owned by (a) Attestor Value Master Fund LP, a Cayman Islands exempted limited partnership ("Attestor"), as a result of its direct ownership of the Shares reported herein, (b) Attestor Value Fund GP Limited, a Cayman Islands exempted private limited company ("Attestor GP"), as the sole general partner of Attestor, (c) Attestor Capital Limited, a Cayman Islands exempted private limited company registered in England and Wales (with company number 12080120) ("Attestor Limited"), as the investment manager to Attestor, and (e) Mr. Jan-Christoph Peters, as the sole director and sole indirect shareholder of Attestor Limited. Attestor GP, Attestor GP, Attestor Capital, Attestor Limited and Mr. Peters are collectively referred to as the "Reporting Persons."

Attestor Value Master Fund LP, acting by Attestor Limited, By: /s/ Jan-Christoph Peters, Name: Jan-Christoph Peters, Title: Authorised Attorney	<u>06/14/2021</u>
Attestor Value Fund GP Limited, By: /s/ Jan-Christoph Peters, Name: Jan-Christoph Peters, Title: Director	<u>06/14/2021</u>
<u>Attestor Capital Limited, By:</u> <u>/s/ Jan-Christoph Peters,</u> <u>Name: Jan-Christoph Peters,</u> <u>Title: Director</u>	<u>06/14/2021</u>
<u>Attestor Limited, By: /s/ Jan-</u> <u>Christoph Peters, Name: Jan-</u> <u>Christoph Peters, Title:</u> <u>Authorised Attorney</u>	<u>06/14/2021</u>
<u>/s/ Jan-Christoph Peters,</u> <u>Name: Jan-Christoph Peters</u> ** Signature of Reporting Person	<u>06/14/2021</u> Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.