

**UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA**

SAM FARRAR, Individually and on Behalf of All
Others Similarly Situated,

Plaintiff,

v.

WORKHORSE GROUP, INC., DUANE HUGHES,
STEVE SCHRADER, ROBERT WILLISON, and
GREGORY ACKERSON

Defendants.

Case No. 2:21-cv-02072-CJC-PVC

PROOF OF CLAIM

Deadline for Submission: July 3, 2023

If you purchased or otherwise acquired Workhorse Group, Inc. (“Workhorse” or the “Company”) common stock (ticker symbol “WKHS”) between March 10, 2020 and May 10, 2021, inclusive, you could get a payment from a class action settlement.

IF YOU ARE A SETTLEMENT CLASS MEMBER, YOU MUST COMPLETE AND SUBMIT THIS FORM IN ORDER TO BE ELIGIBLE FOR ANY SETTLEMENT BENEFITS.

YOU MUST COMPLETE AND SIGN THIS PROOF OF CLAIM AND RELEASE (“PROOF OF CLAIM”) AND SUBMIT IT ELECTRONICALLY OR MAIL IT BY FIRST CLASS MAIL, POSTMARKED NO LATER THAN JULY 3, 2023, TO THE FOLLOWING ADDRESS:

Workhorse Securities Litigation
c/o KCC Class Action Services, LLC
P.O. Box 301133
Los Angeles, CA 90030-1133
(by regular or express mail)

Workhorse Securities Litigation
c/o KCC Class Action Services, LLC
222 N. Pacific Coast Hwy, Suite 300
El Segundo, CA 90245
(by express delivery service)

YOUR FAILURE TO SUBMIT YOUR CLAIM BY JULY 3, 2023, WILL SUBJECT YOUR CLAIM TO REJECTION AND PRECLUDE YOUR RECEIVING ANY MONEY IN CONNECTION WITH THE SETTLEMENT OF THIS ACTION. DO NOT MAIL OR DELIVER YOUR CLAIM TO THE COURT OR TO ANY OF THE PARTIES OR THEIR COUNSEL AS ANY SUCH CLAIM WILL BE DEEMED NOT TO HAVE BEEN SUBMITTED. SUBMIT YOUR CLAIM ONLY TO THE CLAIMS ADMINISTRATOR.

CLAIMANT’S STATEMENT

1. I (we) purchased Workhorse common stock and was (were) damaged thereby. (Do not submit this Proof of Claim if you did not purchase Workhorse common stock during the designated Class Period.)

2. By submitting this Proof of Claim, I (we) state that I (we) believe in good faith that I am (we are) a Settlement Class Member(s) as defined above and in the Notice of Proposed Settlement of Class Action Notice of Pendency and Proposed Settlement (the “Notice”), or am (are) acting for such person(s); that I am (we are) not a Defendant in the Actions or anyone excluded from the Class; that I (we) have read and understand the Notice; that I (we) believe that I am (we are) entitled to receive a share of the Net Settlement Fund, as defined in the Notice; that I (we) elect to participate in the proposed Settlement described in the Notice; and that I (we) have not filed a request for exclusion. (If you are acting in a representative capacity on behalf of a Settlement Class Member [e.g., as an executor, administrator, trustee, or other representative], you must submit evidence of your current authority to act on behalf of that Settlement Class Member. Such evidence would include, for example, letters testamentary, letters of administration, or a copy of the trust documents.)

3. I (we) consent to the jurisdiction of the Court with respect to all questions concerning the validity of this Proof of Claim. I (we) understand and agree that my (our) claim may be subject to investigation and discovery under the Federal Rules of Civil Procedure, provided that such investigation and discovery shall be limited to my (our) status as a Settlement Class Member(s) and the validity and amount of my (our) claim. No discovery shall be allowed on the merits of the Action or Settlement in connection with processing of the Proof of Claim.

4. I (we) have set forth where requested below all relevant information with respect to each purchase of Workhorse common stock shares during the Class Period, and each sale, if any. I (we) agree to furnish additional information to the Claims Administrator to support this claim if requested to do so.

5. I (we) have enclosed photocopies of the stockbroker's confirmation slips, stockbroker's statements, or other documents evidencing each purchase, sale, or retention of Workhorse common stock listed below in support of our claim. (IF ANY SUCH DOCUMENTS ARE NOT IN YOUR POSSESSION, PLEASE OBTAIN A COPY OR EQUIVALENT DOCUMENTS FROM YOUR BROKER BECAUSE THESE DOCUMENTS ARE NECESSARY TO PROVE AND PROCESS YOUR CLAIM.)

6. I (we) understand that the information contained in this Proof of Claim is subject to such verification as the Claims Administrator may request or as the Court may direct, and I (we) agree to cooperate in any such verification. (The information requested herein is designed to provide the minimum amount of information necessary to process most simple claims. The Claims Administrator may request additional information as required to efficiently and reliably calculate your recognized claim. In some cases, the Claims Administrator may condition acceptance of the claim based upon the production of additional information, including, where applicable, information concerning transactions in any derivatives securities such as options.)

7. Upon the occurrence of the Effective Date, as defined in the Notice, I (we) agree and acknowledge that my (our) signature(s) hereto shall effect and constitute a full and complete release, remise and discharge by me (us) and my (our) heirs, joint tenants, tenants in common, beneficiaries, executors, administrators, predecessors, successors, attorneys, insurers and assigns (or, if I am (we are) submitting this Proof of Claim on behalf of a corporation, a partnership, estate or one or more other persons, by it, him, her or them, and by its, his, her or their heirs, executors, administrators, predecessors, successors, and assigns) of all of the Released Claims (including Unknown Claims) against each of the "Released Defendants' Parties", as defined in the Notice.

NOTICE REGARDING ELECTRONIC FILES: Claimants may submit information regarding their transactions in electronic files. All Claimants MUST submit a signed Proof of Claim form whether or not they submit electronic files. If you wish to file your claim electronically, you must contact the Claims Administrator toll-free at 1-844-787-0160 or visit their website at www.WorkhorseSecuritiesLitigation.com, to obtain the required file layout. No electronic files will be considered to have been properly submitted unless the Claims Administrator issues to the Claimant a written acknowledgment of receipt and acceptance of electronic submission.

Official
Office
Use
Only

UNITED STATES DISTRICT COURT
CENTRAL DISTRICT OF CALIFORNIA

Farrar v. Workhorse Group, Inc., et al.

Case No. 2:21-cv-02072-CJC-PVC

PROOF OF CLAIM AND RELEASE

**Must Be Postmarked (if Mailed)
or Received (if Submitted Online)
No Later Than July 3, 2023**

WOF

Please Type or Print in the Boxes Below
Do NOT use Red Ink, Pencil, or Staples

The Claims Administrator will use this information for all communications regarding this Claim Form. If this information changes, you MUST notify the Claims Administrator in writing at the address below. Complete names of all persons and entities must be provided.

PART I. CLAIMANT IDENTIFICATION

| | | |
|-----------|------|------------|
| Last Name | M.I. | First Name |
| | | |

| | | |
|---------------------------------|------|----------------------------------|
| Last Name (Co-Beneficial Owner) | M.I. | First Name (Co-Beneficial Owner) |
| | | |

IRA Corporation UGMA Custodian Partnership Individual Estate Trust Other

Company Name (Beneficial Owner - If Claimant is not an Individual) or Custodian Name if an IRA (specify)

Trustee/Asset Manager/Nominee/Record Owner's Name (If Different from Beneficial Owner Listed Above)

Account#/Fund# (Not Necessary for Individual Filers)

| | | |
|--|----|--------------------------------|
| Last Four Digits of Social Security Number | or | Taxpayer Identification Number |
| | | |

| | |
|------------------------------------|------------------------------|
| Telephone Number (Primary Daytime) | Telephone Number (Alternate) |
| | |

Email Address

MAILING INFORMATION

Address

Address

| | | |
|------|-------|----------|
| City | State | ZIP Code |
| | | |

| | | |
|------------------|---------------------|-----------------------------------|
| Foreign Province | Foreign Postal Code | Foreign Country Name/Abbreviation |
| | | |

| | | | | | | | |
|----------------------------|----|----|--|---|--|----------------|----------------------------|
| FOR CLAIMS PROCESSING ONLY | OB | CB | <input type="radio"/> ATP <input type="radio"/> BE <input type="radio"/> FL <input type="radio"/> OP | <input type="radio"/> KE <input type="radio"/> DR <input type="radio"/> ME <input type="radio"/> RE | <input type="radio"/> ICI <input type="radio"/> EM <input type="radio"/> ND <input type="radio"/> SH | MM / DD / YYYY | FOR CLAIMS PROCESSING ONLY |
|----------------------------|----|----|--|---|--|----------------|----------------------------|



SCHEDULE OF TRANSACTIONS IN WORKHORSE COMMON STOCK

PART II. TRANSACTIONS IN WORKHORSE COMMON STOCK

BEGINNING HOLDINGS - State the total number of shares of Workhorse common stock owned at the open of trading on March 10, 2020 long or short. If none, write "0" or "Zero." (Must be documented.) Proof Enclosed?
 Y N

A. PURCHASES DURING THE CLASS PERIOD AND DURING THE 90-DAY LOOK-BACK PERIOD – Separately list each and every purchase of Workhorse common stock during the period from March 10, 2020, to August 6, 2021, inclusive, and provide the following information (must be documented):

| PURCHASES | | | | | | | | | | | | | |
|--------------------------------------|---|---|---|---|-------|---|----------------------------|----|---|----|--|-------------------------|-------------------------|
| Trade Date (List Chronologically) | | | | Number of Shares Purchased or Acquired | Price | Total Cost (excluding taxes, commissions, and fees) | Transaction Type (P/R)* | | Proof of Purchase Enclosed? (Y/N) | | | | |
| M | M | D | D | Y | Y | Y | Y | | | | | | |
| 1. | | / | | / | | | | \$ | | \$ | | <input type="radio"/> P | <input type="radio"/> Y |
| | | | | | | | | | | | | <input type="radio"/> R | <input type="radio"/> N |
| 2. | | / | | / | | | | \$ | | \$ | | <input type="radio"/> P | <input type="radio"/> Y |
| | | | | | | | | | | | | <input type="radio"/> R | <input type="radio"/> N |
| 3. | | / | | / | | | | \$ | | \$ | | <input type="radio"/> P | <input type="radio"/> Y |
| | | | | | | | | | | | | <input type="radio"/> R | <input type="radio"/> N |
| 4. | | / | | / | | | | \$ | | \$ | | <input type="radio"/> P | <input type="radio"/> Y |
| | | | | | | | | | | | | <input type="radio"/> R | <input type="radio"/> N |

*P – Purchase, R – Received (Transfer-In)

B. SALES DURING THE CLASS PERIOD AND DURING THE 90-DAY LOOK-BACK PERIOD – Separately list each and every sale of Workhorse common stock during the period from March 10, 2020, to August 6, 2021, inclusive, and provide the following information (must be documented):

| SALES | | | | | | | | | | | | | |
|--------------------------------------|---|---|---|-----------------------------|-------|---|----------------------------|----|---|----|--|-------------------------|-------------------------|
| Trade Date (List Chronologically) | | | | Number of Shares Sold | Price | Amount Received (excluding taxes, commissions, and fees) | Transaction Type (S/D)* | | Proof of Purchase Enclosed? (Y/N) | | | | |
| M | M | D | D | Y | Y | Y | Y | | | | | | |
| 1. | | / | | / | | | | \$ | | \$ | | <input type="radio"/> S | <input type="radio"/> Y |
| | | | | | | | | | | | | <input type="radio"/> D | <input type="radio"/> N |
| 2. | | / | | / | | | | \$ | | \$ | | <input type="radio"/> S | <input type="radio"/> Y |
| | | | | | | | | | | | | <input type="radio"/> D | <input type="radio"/> N |
| 3. | | / | | / | | | | \$ | | \$ | | <input type="radio"/> S | <input type="radio"/> Y |
| | | | | | | | | | | | | <input type="radio"/> D | <input type="radio"/> N |
| 4. | | / | | / | | | | \$ | | \$ | | <input type="radio"/> S | <input type="radio"/> Y |
| | | | | | | | | | | | | <input type="radio"/> D | <input type="radio"/> N |

*S – Sale, D – Delivery (Transfer-Out)

ENDING HOLDINGS – State the total number of shares of Workhorse common stock owned at the close of trading on August 6, 2021, long or short. If none, write "0" or "Zero." (Must be documented.) Proof Enclosed?
 Y N

If you require additional space, attach extra schedules in the same format as above. Sign and print your name on each additional page.

**YOU MUST READ AND SIGN THE RELEASE ON PAGE 5. FAILURE TO SIGN THE RELEASE
MAY RESULT IN A DELAY IN PROCESSING OR THE REJECTION OF YOUR CLAIM.**



III. CERTIFICATION

I (We) certify that I am (we are) NOT subject to backup withholding under the provisions of Section 3406 (a)(1)(c) of the Internal Revenue Code because: (a) I am (We are) exempt from backup withholding, or (b) I (We) have not been notified by the I.R.S. that I am (we are) subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the I.R.S. has notified me (us) that I am (we are) no longer subject to backup withholding.

NOTE: If you have been notified by the I.R.S. that you are subject to backup withholding, please strike out the language that you are not subject to backup withholding in the certification above.

UNDER THE PENALTIES OF PERJURY, I (WE) CERTIFY THAT ALL OF THE INFORMATION I (WE) PROVIDED ON THIS PROOF OF CLAIM AND RELEASE FORM IS TRUE, CORRECT AND COMPLETE.

Executed this _____ day of _____ in _____
(Month/Year) (City/State/Country)

(Sign your name here)

(Sign your name here)

(Type or print your name here)

(Type or print your name here)

(Capacity of person(s) signing, e.g.,
Beneficial Purchaser or Acquirer, Executor or Administrator)

(Capacity of person(s) signing, e.g.,
Beneficial Purchaser or Acquirer, Executor or Administrator)

**ACCURATE CLAIMS PROCESSING TAKES A SIGNIFICANT AMOUNT OF TIME.
THANK YOU FOR YOUR PATIENCE.**

Reminder Checklist:

1. Please be sure to sign this Proof of Claim. If this Proof of Claim is submitted on behalf of joint claimants, then both claimants must sign.
2. Please remember to attach supporting documents. Do NOT send any stock certificates. Keep copies of everything you submit.
3. Do NOT use highlighter on the Proof of Claim or any supporting documents.
4. If you move after submitting this Proof of Claim, please notify the Claims Administrator of the change in your address.

THIS CLAIM FORM MUST BE SUBMITTED ONLINE AT WWW.WORKHORSESECURITIESLITIGATION.COM OR MAILED POSTMARKED NO LATER THAN JULY 3, 2023, ADDRESSED AS FOLLOWS:

**Workhorse Securities Litigation
c/o KCC Class Action Services, LLC
P.O. Box 301133
Los Angeles, CA 90030-1133
(by regular or express mail)**

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