## UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA WESTERN DIVISION

ARTHUR KAYE IRA FCC AS CUSTODIAN DTD 6-8-00 and HAYDEN LEASON, Individually and On Behalf of All Others Similarly Situated,

Plaintiffs,

V.

IMMUNOCELLULAR THERAPEUTICS, LTD., DAVID FRACTOR, MANISH SINGH, LAVOS, LLC, LIDINGO HOLDINGS, LLC, KAMILLA BJORLIN, ANDREW HODGE, and BRIAN NICHOLS,

Defendants.

Case No. 2:17-cv-03250-FMO (SKx)

### **CLASS ACTION**

# PROOF OF CLAIM AND RELEASE<sup>1</sup>

### THIS FORM MUST BE DELIVERED OR POSTMARKED BY JULY 24, 2019

If you purchased ImmunoCellular Therapeutics, Ltd. ("IMUC") common stock on the open market between May 1, 2012 and May 30, 2014, inclusive, and were damaged thereby, you may be a member of the Settlement Class and may be entitled to recover a portion of a Settlement Fund established in connection with a proposed Settlement of the action captioned *Kaye v. ImmunoCellular Therapeutics*, Ltd., et al., Case No. 2:17-cv-03250-FMO-SK (C.D. Cal.) (the "Action").

### I. GENERAL INSTRUCTIONS

It is important that you completely read and understand the Notice of Proposed Class Action Settlement, available at <a href="https://www.imucsecuritieslitigation.com">www.imucsecuritieslitigation.com</a>, including the Plan of Allocation of the Net Settlement Fund set forth in the Notice. The Notice describes the proposed Settlement, how Settlement Class Members are affected by the Settlement, and the manner in which the Net Settlement Fund will be distributed if the Settlement and Plan of Allocation are approved by the Court. The Notice also contains the definitions of many of the defined terms (which are indicated by initial capital letters) used in this Proof of Claim and Release form ("Proof of Claim"). By signing and submitting this Proof of Claim form, you will be certifying that you have read and that you understand the Notice, including the terms of the releases described therein and provided for herein.

- A. To recover as a member of the Settlement Class, you must complete, sign, and submit this Proof of Claim form in accordance with the instructions provided herein. If you fail to submit a valid and timely Proof of Claim in accordance with these instructions, your claim may be rejected and you may be precluded from any recovery from the Settlement Fund created in connection with the proposed Settlement of the Action.
- B. Submission of this Proof of Claim, however, does not assure that you will share in the proceeds of Settlement of the Action.
- C. YOU MUST MAIL YOUR COMPLETED AND SIGNED PROOF OF CLAIM AND RELEASE FORM **POSTMARKED ON OR BEFORE JULY 24, 2019**, ADDRESSED TO THE CLAIMS ADMINISTRATOR AS FOLLOWS: ImmunoCellular Therapeutics Ltd. Sec. Litig., c/o A.B. Data, Ltd. Class Action Administration, P.O. Box 173054, Milwaukee, WI 53217; Tel: 800-391-9724; email: info@imucsecuritieslitigation.com.

### You will bear all risks of delay or non-delivery of your Proof of Claim.

D. If you are a member of the Settlement Class (as that term is defined in the Notice of Proposed Class Action Settlement (hereinafter, "Notice") and you do not timely request exclusion in accordance with the instructions provided in the

<sup>&</sup>lt;sup>1</sup> This Proof of Claim Form incorporates by reference the definitions in the Amended Stipulation of Settlement dated as of December 10, 2018 (the "Stipulation"). Unless otherwise specified, all capitalized terms used, but not defined herein, shall have the same meanings as in the Stipulation. The Stipulation can be obtained at www.imucsecuritieslitigation.com.

Notice, you will be bound by the terms of any order of dismissal or judgment entered in the Action, including the releases provided herein, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM.

- E. If you are not a Settlement Class Member (as defined in the Notice), DO NOT submit a Proof of Claim.
- F. If you are a Settlement Class Member, DO NOT submit both a Proof of Claim and a Request for Exclusion. Doing so will delay administration of the Settlement.

### II. CLAIMANT IDENTIFICATION INSTRUCTIONS

- A. If you purchased IMUC common stock and held the certificate(s) in your own name, you are the beneficial owner as well as the record owner. If, however, the certificate(s) were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial owner and the third party is the record owner.
- B. Use Section IV of this form entitled "Claimant Identification" to identify each owner of record ("nominee"), if different from the beneficial owner of IMUC common stock which forms the basis of this claim.
- C. THIS PROOF OF CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL OWNERS OF THE IMUC COMMON STOCK UPON WHICH THIS CLAIM IS BASED, OR BY THEIR LEGAL REPRESENTATIVES.
- D. A separate Proof of Claim must be filed for each type of account or ownership (*i.e.*, individual account, IRA account, joint account, custodial account, etc.). Joint tenants or UGMA custodians should file a single claim.
- E. All joint owners must sign this Proof of Claim form. Executors, administrators, guardians, conservators, and trustees must complete and sign this Proof of Claim on behalf of persons represented by them. Documentation establishing their authority must accompany this Proof of Claim and their titles or capacities must be stated.
- F. The Social Security or Taxpayer Identification number and telephone number of the beneficial owner may be used in verifying the claim. Failure to provide the foregoing information could delay verification of your claim or result in rejection of the claim.

### III. TRANSACTION SCHEDULE INSTRUCTIONS

- A. Use Section V of this form entitled "Schedule of Transactions in IMUC Common Stock" to supply all required details of your transaction(s) in IMUC common stock. If you need more space or additional schedules, attach separate sheets giving all of the required information in substantially the same form. Sign and print or type your name and Social Security or Taxpayer Identification number on each additional sheet.
- B. List each transaction during the Class Period separately and in chronological order, by trade date (not the "settlement" date), beginning with the earliest. You must accurately provide the month, day, and year of each transaction you list.
  - C. The price per share, paid or received, should be exclusive of all commissions, taxes, fees, and other charges.
- D. Copies of broker confirmation slips or monthly statements of your transactions in IMUC common stock must be attached to your Proof of Claim. If such documents are not in your possession, please obtain equivalent contemporaneous documents from your broker or financial advisor. A complete list of acceptable supporting documentation can be found at the Claims Administrator's website: www.imucsecuritieslitigation.com. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.
- E. NOTICE REGARDING ELECTRONIC FILES: Certain Claimants with large numbers of transactions may request, or may be requested, to submit information regarding their transactions in electronic files. To obtain the mandatory electronic filing requirements and file layout, you may visit the website at www.imucsecuritieslitigation.com or you may email the Claims Administrator's electronic filing department at info@imucsecuritieslitigation.com. Any file not in accordance with the required electronic filing format will be subject to rejection. Only one claim should be submitted for each separate legal entity (*see* Section II.D. above) and the complete name of the beneficial owner(s) of the securities must be entered where called for (*see* Section II.E. above). No electronic files will be considered to have been submitted unless the Claims Administrator issues an email to that effect. Do not assume that your file has been received until you receive this email. If you do not receive such an email within 10 days of your submission, you should contact the electronic filing department at info@imucsecuritieslitigation.com to inquire about your file and confirm it was received.

MUST BE POSTMARKED OR RECEIVED NO LATER THAN JULY 24, 2019 Immuno Cellular Therapeutics, Ltd. Sec. Litig. c/o A.B. DATA, LTD. – CLASS ACTION ADMINISTRATION PO Box 173054 Milwaukee, WI 53217



FOR INTERNAL USE ONLY

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

IV. CLAIMANT IDENTIFICATION
Beneficial Owner's Name (as it appears on your brokerage statement)
Beneficial Owner's Name (as it appears on your brokerage statement)
Mailing Address – Line 1: Street Address/P.O. Box:
Mailing Address – Line 2 (If Applicable): Apartment/Suite/Floor Number:
City: State: Zip Code:
Foreign Province: Foreign Postal Code: Foreign Country:
Social Security Number or Taxpayer Identification Number:
Social Security Trainiser of Taxpayer Identification Trainiser.
Area Code & Telephone Number (day)  Area Code & Telephone Number (evening)
Record Owner's Name and Address (if different from beneficial owner listed above)
Specify one of the following:
□ Individual/Sole Proprietor □ Joint Ownership □ Corporation □ UGMA Custodian □ IRA □ Partnership
□ Pension Plan □ Estate □ Trust □ IRA □ Other:

$\mathbf{V}$	SCHEDIILE	OF TRANSA	CTIONS IN IMIIC	COMMON STOCK
V .	SCHEDULE	Ur INANSA	CTIONS IN INTUC.	

A.	Number of shares of IMUC common stock purchased on the open market and held at the close of trading on April 30,
2012:	

B. Separately list each and **every purchase** of **IMUC** common stock on the open market during the period May 1, 2012 **through and including** May 30, 2014, and provide all of the following information (*must be documented*):

Trade Date (list chronologically) Month/Day/Year	Number of Shares of Common Stock Purchased	Price Per Share (excluding commissions, taxes, and other fees)	Total Purchase Price (excluding commissions, taxes, and other fees)
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$

C. Separately list each and **every sale** of IMUC common stock on the open market during the period May 1, 2012 **through and including** May 30, 2014, and provide the following information (*must be documented*):

Trade Date (list chronologically) Month/Day/Year	Number of Shares of Common Stock Sold	Price Per Share (excluding commissions, taxes, and other fees)	Total Sale Price (excluding commissions, taxes, and other fees)
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$

D.	State the total	number o	f shares	of IMUC	common	stock	owned	at the	close	of t	trading	on N	1ay 30	), 2014	(must	be
docume	ented; if none, e	enter "0"):														

E. Separately list each and **every purchase** of **IMUC** common stock on the open market during the period May 31, 2014 **through and including** August 29, 2014, and provide all of the following information (*must be documented*):

Trade Date (list chronologically) Month/Day/Year	Number of Shares of Common Stock Purchased	Price Per Share (excluding commissions, taxes, and other fees)	Total Purchase Price (excluding commissions, taxes, and other fees)
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$
//		\$	\$

F. Separately list each and **every sale** of IMUC common stock on the open market during the period May 31, 2014 **through and including** August 29, 2014, and provide the following information (*must be documented*):

Trade Date (list chronologically) Month/Day/Year	Number of Shares of Common Stock Sold	Price Per Share (excluding commissions, taxes, and other fees)	Total Sale Price (excluding commissions, taxes, and other fees)
//		\$	\$
/		\$	\$
//		\$	\$
/		\$	\$
/		\$	\$
//		\$	\$
/		\$	\$
//		\$	\$

G. docume	State the total number of shares of IMUC common stock owned at the close of trading on August 29, 2014 (must be ented; if none, enter "0"):
Н.	Please check applicable box:
[_]	I certify that the submitting party is <b>not</b> an ERISA plan.
[_]	I/We certify that the submitting party is an ERISA plan and has complied with the applicable ERISA exemption.

If you need more space, attach the required information on separate, numbered sheets in the same format as above and sign and print your name and Social Security or Taxpayer Identification number at the top of each additional sheet.

# YOU MUST READ THE RELEASE AND SIGN ON PAGE 7. FAILURE TO SIGN THE RELEASE MAY RESULT IN A DELAY IN PROCESSING OR THE REJECTION OF YOUR CLAIM.

### VI. SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS

I/We submit this Proof of Claim and Release under the terms of the Stipulation of Settlement described in the Notice. I/We also submit to the jurisdiction of the United States District Court for the Central District of California with respect to my/our claim as a Settlement Class Member and for purposes of enforcing the release set forth herein. I/We further acknowledge that I/we am/are bound by and subject to the terms of any judgment that may be entered in the Action. I/we agree to furnish additional information to Co-Lead Counsel or the Claims Administrator to support this claim if requested to do so. I/we have not submitted any other claim covering the same purchases or sales of IMUC common stock during the Class Period and know of no other person having done so on my/our behalf. I/we have not requested exclusion from the Settlement.

### VII. RELEASE

- A. On behalf of the claimant listed above and any other individual or business or legal entity claiming (now or in the future) through or on behalf of the claimant, directly or indirectly (collectively, the "Releasing Parties"), as of the date the Settlement becomes effective, I/we hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever release, relinquish, discharge, and dismiss from each and all of the Released Claims, each and all of the Released Persons, and covenant not to sue any Released Person with respect to any Released Claim.
- B. On behalf of the Releasing Parties, as of the date the Settlement becomes effective, I/we hereby agree that the Releasing Parties are permanently barred, enjoined, and restrained from commencing, instituting, asserting, maintaining, enforcing, prosecuting, or otherwise pursuing, either directly or in any other capacity, any of the Released Claims against any Released Person.
- C. The foregoing releases shall be of no force or effect unless and until the Court approves the Stipulation of Settlement and the Stipulation becomes effective on the Effective Date.
- D. I/We hereby warrant and represent that I/we have not assigned or transferred or purported to assign or transfer, voluntarily or involuntarily, in whole or in part, any matter released herein.
- E. I/We hereby warrant and represent that I/we have included information about all of my/our transactions in IMUC common stock during the Class Period.

# VIII. DECLARATION

## UNDER THE PENALTY OF PERJURY, I/WE CERTIFY THAT:

- A. The number shown on this form is my correct Social Security or Taxpayer Identification number.
- B. I am/we are NOT subject to backup withholding under the provisions of Section 3406 (a)(1)(C) of the Internal Revenue Code.
- **NOTE:** If you have been notified by the Internal Revenue Service that you are subject to backup withholding, you must cross out the word "NOT" in the sentence above.
- C. I/We declare under penalty of perjury under the laws of the United States of America that the foregoing information supplied by the undersigned and any supporting documents attached hereto are true, correct, and complete to the

this Proof of Claim and Release was executed this	day o
<del>.</del>	
Signature of Joint Claimant, if any	
(Print your name here)	
	Signature of Joint Claimant, if any

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

## **Reminder Checklist:**

- 1. Remember to sign the above release and declaration.
- 2. Remember to attach only **copies** of acceptable supporting documentation, a complete list of which can be found on the Claims Administrator's website.
- 3. Do not send originals of common stock certificates.
- 4. Keep copies of the completed Proof of Claim form and documentation for your own records.
- 5. If you desire an acknowledgment of receipt of your Proof of Claim form, please send it Certified Mail, Return Receipt Requested, or its equivalent. You will bear all risks of delay or non-delivery of your claim.
- 6. If your address changes in the future, or if these documents were sent to an old or incorrect address, please send us **written** notification of your new address.
- 7. Do not use highlighter on the Proof of Claim or supporting documentation.
- 8. If you have any questions or concerns regarding your claim or how to complete and submit this Proof of Claim, please contact the Claims Administrator at: info@imucsecuritieslitigation.com.