PROOF OF CLAIM AND RELEASE FORM

Turquoise Hill Securities Litigation

Toll-Free Telephone Number: 855-779-3513

Email: info@TurquoiseHillSecuritiesLitigation.com Website: www.TurquoiseHillSecuritiesLitigation.com

To be eligible to receive a share of the Net Settlement Fund in connection with the Settlement of this Action, you must complete and sign this Proof of Claim and Release Form ("Claim Form") and mail it by first-class mail to the address below, or submit it online at www.TurquoiseHillSecuritiesLitigation.com, with supporting documentation, postmarked (if mailed) or received no later than September 24, 2025.

Mail to:

Turquoise Hill Securities Litigation c/o JND Legal Administration P.O. Box 91153 Seattle, WA 98111

Failure to submit your Claim Form by the date specified will subject your claim to rejection and may preclude you from being eligible to receive any money in connection with the Settlement.

Do not mail or deliver your Claim Form to the Court, the Parties to the Action, or their counsel. Submit your Claim Form only to the Claims Administrator at the address set forth above.

CONTENTS

02	PART I.	CLAIMANT INFORMATION
03	PART II.	GENERAL INSTRUCTIONS
06	PART III.	SCHEDULE OF TRANSACTIONS IN TURQUOISE HILL COMMON STOCK (TRQ, CUSIP: 900435108)
80	PART IV.	SCHEDULE OF TRANSACTIONS IN TURQUOISE HILL CALL OPTIONS
10	PART V.	SCHEDULE OF TRANSACTIONS IN TURQUOISE HILL PUT OPTIONS
12	PART VI.	RELEASE OF CLAIMS AND SIGNATURE

PART I - CLAIMANT INFORMATION

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 above. Complete names of all persons and entities must be provided.

Beneficial Owner's First Name	MI	Beneficial Owner's Last Name
Joint Beneficial Owner's First Name (if applicable	(e) MI	Joint Beneficial Owner's Last Name (if applicable)
If this claim is submitted for an IRA, and if you w the IRA, please include "IRA" in the "Last Name"		check that you MAY be eligible to receive made payable to e.g., Jones IRA).
Entity Name (if the Beneficial Owner is not an in	dividual)	
No. (Day of the Year Feel (constant)		
Name of Representative, if applicable (executor)	, administrato	or, trustee, c/o, etc.), if different from Beneficial Owner
Last 4 digits of Social Security Number or Taxpa	ayer Identifica	ition Number
Street Address 1		
Street Address 2		
City		State/Province Zip Code
Foreign Deetal Code (if applicable)		Foreign Country (if applicable)
Foreign Postal Code (if applicable)		Foreign Country (if applicable)
Telephone Number (Day)		Telephone Number (Evening)
	L	
providing you with information relevant to this cla		ovide it you authorize the Claims Administrator to use it in
Account Number		
Type of Beneficial Owner:		
☐ Individual ☐ Corporation ☐ UG	MA Custodia	n 🔲 IRA
Partnership Estate True	st 🔲	Other (please specify):

PART II - GENERAL INSTRUCTIONS

- 1. It is important that you completely read the Notice of (I) Pendency of Class Action and Proposed Settlement; (II) Settlement Hearing; and (III) Motion for Attorneys' Fees and Litigation Expenses (the "Notice") that accompanies this Claim Form, 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 Claim Form. By signing and submitting this 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.
- 2. By submitting this Claim Form, you will be making a request to share in the proceeds of the Settlement described in the Notice. If you are not a Settlement Class Member (see the definition of the Settlement Class on page 8 of the Notice), or if you, or someone acting on your behalf, submitted a request for exclusion from the Settlement Class, do not submit a Claim Form. You may not, directly or indirectly, participate in the Settlement if you are not a Settlement Class Member. Thus, if you are excluded from the Settlement Class, any Claim Form that you submit, or that may be submitted on your behalf, will not be accepted.
- 3. Submission of this Claim Form does not guarantee that you will share in the proceeds of the Settlement. The distribution of the Net Settlement Fund will be governed by the Plan of Allocation set forth in the Notice or by such other plan of allocation as the Court approves.
- 4. On the Schedule of Transactions in Parts III, IV, and V of this Claim Form, provide all of the requested information with respect to your holdings, purchases, acquisitions, and sales of (i) Turquoise Hill Resources Ltd. ("Turquoise Hill") common stock; (ii) swap transactions that replicate a purchase of Turquoise Hill common stock; (iii) call options on Turquoise Hill common stock; and (iv) put options on Turquoise Hill common stock (collectively, "Turquoise Hill Securities"), including free transfers and deliveries, whether such transactions resulted in a profit or a loss. Failure to report all transaction and holding information during the requested time periods may result in the rejection of your claim.
- 5. Please note: Only Turquoise Hill common stock (or swap transactions that replicate a common stock purchase) or call options on Turquoise Hill common stock purchased/acquired, or put options on Turquoise Hill common stock sold (written) during the Class Period (i.e., from July 17, 2018 through July 31, 2019, inclusive) in domestic (U.S.) transactions or on U.S. exchanges are eligible under the Settlement. However, because the PSLRA provides for a "90-day look-back period" (described in the Plan of Allocation set forth in the Notice), you must provide documentation related to your purchases, acquisitions, and sales of Turquoise Hill common stock during the period from August 1, 2019 through October 29, 2019 (i.e., the 90-day look-back period) in order for the Claims Administrator to calculate your Recognized Loss Amount under the Plan of Allocation and process your claim.
- 6. You are required to submit genuine and sufficient documentation for all of your transactions in and holdings of the eligible Turquoise Hill Securities set forth in the Schedules of Transactions in Parts III to V of this Claim Form. Documentation may consist of copies of brokerage confirmation slips or monthly brokerage account statements, or an authorized statement from your

broker containing the transactional and holding information found in a broker confirmation slip or account statement. Due to the fact that Turquoise Hill securities traded in both the United States and Canada you may be required to provide documentation or other proof that your transactions in Turquoise Hill Securities during the Class Period occurred on a United States exchange or otherwise occurred in the United States. To the extent that you report swap transactions that replicate a purchase of Turquoise Hill common stock during the Class Period, you may be required to provide information reflecting the terms and conditions of such swaps sufficient to ensure that such swap transactions are eligible for payment under the Plan of Allocation. The Parties and the Claims Administrator do not independently have information about your investments in the Turquoise Hill Securities. IF SUCH DOCUMENTS ARE NOT IN YOUR POSSESSION, PLEASE OBTAIN COPIES OF THE DOCUMENTS OR EQUIVALENT DOCUMENTS FROM YOUR BROKER. FAILURE TO SUPPLY THIS DOCUMENTATION MAY RESULT IN THE REJECTION OF YOUR CLAIM. DO NOT SEND ORIGINAL DOCUMENTS.

- 7. Please keep a copy of all documents that you send to the Claims Administrator. Also, do not highlight any portion of the Claim Form or any supporting documents.
- 8. Use Part I of this Claim Form entitled "CLAIMANT INFORMATION" to identify the beneficial owner(s) of the Turquoise Hill Securities. The complete name(s) of the beneficial owner(s) must be entered. If you held the Turquoise Hill Securities in your own name, you were the beneficial owner as well as the record owner. If, however, your Turquoise Hill Securities were registered in the name of a third party, such as a nominee or brokerage firm, you were the beneficial owner of these shares, but the third party was the record owner. The beneficial owner, not the record owner, must sign this Claim Form to be eligible to participate in the Settlement. If there were joint beneficial owners each must sign this Claim Form and their names must appear as "Claimants" in Part I of this Claim Form.
- 9. One Claim should be submitted for each separate legal entity or separately managed account. Separate Claim Forms should be submitted for each separate legal entity (e.g., an individual should not combine his or her IRA transactions with transactions made solely in the individual's name). Generally, a single Claim Form should be submitted on behalf of one legal entity including all holdings and transactions made by that entity on one Claim Form. However, if a single person or legal entity had multiple accounts that were separately managed, separate Claims may be submitted for each such account. The Claims Administrator reserves the right to request information on all the holdings and transactions in Turquoise Hill Securities made on behalf of a single beneficial owner.
- 10. Agents, executors, administrators, guardians, and trustees must complete and sign the Claim Form on behalf of persons represented by them, and they must:
 - (a) expressly state the capacity in which they are acting;
 - (b) identify the name, account number, Social Security Number (or taxpayer identification number), address, and telephone number of the beneficial owner of (or other person or entity on whose behalf they are acting with respect to) the Turquoise Hill Securities; and
 - (c) furnish herewith evidence of their authority to bind to the Claim Form the person or entity on whose behalf they are acting. (Authority to complete and sign a Claim Form cannot be established by stockbrokers demonstrating only that they have discretionary authority to trade securities in another person's accounts.)

- 11. By submitting a signed Claim Form, you will be swearing that you:
 - (a) own(ed) the Turquoise Hill Securities you have listed in the Claim Form; or
 - (b) are expressly authorized to act on behalf of the owner thereof.
- 12. By submitting a signed Claim Form, you will be swearing to the truth of the statements contained therein and the genuineness of the documents attached thereto, subject to penalties of perjury under the laws of the United States of America. The making of false statements, or the submission of forged or fraudulent documentation, will result in the rejection of your claim and may subject you to civil liability or criminal prosecution.
- 13. Payments to eligible Authorized Claimants will be made only if the Court approves the Settlement, after any appeals are resolved, and after the completion of all claims processing.
- 14. **PLEASE NOTE**: As set forth in the Plan of Allocation, each Authorized Claimant shall receive his, her, or its *pro rata* share of the Net Settlement Fund. If the prorated payment to any Authorized Claimant calculates to less than \$10.00, it will not be included in the calculation, and no distribution will be made to that Authorized Claimant.
- 15. If you have questions concerning the Claim Form, or need additional copies of the Claim Form or the Notice, you may contact the Claims Administrator, JND Legal Administration, at the above address, by email at info@TurquoiseHillSecuritiesLitigation.com, or by toll-free phone at (855) 779-3513, or you can visit the website, www.TurquoiseHillSecuritiesLitigation.com, where copies of the Claim Form and Notice are available for downloading.
- 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 settlement website at www.TurquoiseHillSecuritiesLitigation.com or you may email the Claims Administrator's electronic filing department at TRQSecurities@TurquoiseHillSecuritiesLitigation.com. Any file not in accordance with the required electronic filing format will be subject to rejection. The *complete* name of the beneficial owner of the securities must be entered where called for (see ¶ 8 above). No electronic files will be considered to have been submitted unless the Claims Administrator issues an email confirming receipt of your submission. Do not assume that your file has been received until you receive that email. If you do not receive such an email within 10 days of your submission. should contact the electronic filing department you TRQSecurities@TurquoiseHillSecuritiesLitigation.com to inquire about your file and confirm it was received.

IMPORTANT PLEASE NOTE:

YOUR CLAIM IS NOT DEEMED FILED UNTIL YOU RECEIVE AN ACKNOWLEDGEMENT POSTCARD. THE CLAIMS ADMINISTRATOR WILL ACKNOWLEDGE RECEIPT OF YOUR CLAIM FORM BY MAIL, WITHIN 60 DAYS. IF YOU DO NOT RECEIVE AN ACKNOWLEDGEMENT POSTCARD WITHIN 60 DAYS, CALL THE CLAIMS ADMINISTRATOR TOLL FREE AT (855) 779-3513.

PART III – SCHEDULE OF TRANSACTIONS IN TURQUOISE HILL COMMON STOCK AND SWAPS REPLICATING A PURCHASE OF TURQUOISE HILL COMMON STOCK

Complete this Part III only if you purchased or otherwise acquired Turquoise Hill common stock during the period from July 17, 2018 through July 31, 2019, inclusive, or you entered into a swap transaction replicating a purchase of Turquoise Hill common stock during the same period, *on U.S. exchanges or otherwise in domestic transactions in the United States*. Do not include information regarding any other securities on this schedule. Please include proper documentation with your Claim Form as described in General Instructions, ¶ 6, above.

	held as of the ope		al number of shares of ⁻ July 17, 2018. (Must b		Confirm Proof of Position Enclosed
every purchase	e or acquisition (in ose of trading on J	cluding free recei	pts) of Turquoise Hill o	7 31, 2019 – Separately common stock from Jul saction or on a U.S. e.	y 17, 2018
Date of Purchase/ Acquisition (List Chronologically) (Month/Day/Year)	Number of Shares Purchased/ Acquired	Purchase/ Acquisition Price Per Share	Total Purchase/ Acquisition Price (excluding any taxes, commissions, and fees)	U.S. Exchange Executed On (e.g. NYSE or Nasdaq) (or, if another exchange or OTC, provide documentation of domesticity)1	Confirm Proof of Purchase/ Acquisition Enclosed
1 1		\$	\$		
1 1		\$	\$		
1 1		\$	\$		
1 1		\$	\$		
1 1		\$	\$		
1 1		\$	\$		

¹ If your purchase or acquisition of Turquoise Hill common stock was not made on a public exchange such as the New York Stock Exchange ("NYSE") or Nasdaq, or if it was made on a foreign exchange, you must submit documentation sufficient to show that the purchase or acquisition occurred in the United States. Generally, a brokerage statement or transaction confirmation showing that the transaction was executed in U,S. dollars and the shares were received into custodial or brokerage account located in the United States will suffice. If you entered into a swap transaction that replicates a purchase of Turquoise Hill common stock, you must provide documentation of the date, price of the underlying Turquoise Hill shares, and the terms and conditions of the swap sufficient to show that the economic effect of the swap is to replicate a purchase of Turquoise Hill common stock.

number of shares of	Turquoise Hill common		OCTOBER 29, 2019 – Stared (including free receipts one, write "zero" or "0."	
every sale or dispos	ition (including free deliv	OCTOBER 29, 2019 – Se veries) of Turquoise Hill colober 29, 2019. (Must be	ommon stock from July	IF NONE, CHECK HERE
Date of Sale (List Chronologically) (Month/Day/Year)	Number of Shares Sold	Sale Price Per Share	Total Sale Price (excluding fees, commissions, and taxes)	Confirm Proof of Sale Enclosed
1 1		\$	\$	
1 1		\$	\$	
1 1		\$	\$	
1 1		\$	\$	
1 1		\$	\$	
1 1		\$	\$	
	as of the close of trading	State the total number of s g on October 29, 2019. (N		Confirm Proof of Position Enclosed
COMMON ST	TOCK AND SWAPS YO	U MUST PHOTOCOPY T	TRANSACTIONS IN TU HESE PAGES AND CHEC NAL PAGES WILL NOT E	CK THE BOX AT

PART IV – SCHEDULE OF TRANSACTIONS IN TURQUOISE HILL CALL OPTIONS

Complete this Part IV only if you purchased or otherwise acquired Turquoise Hill call options during the period from July 17, 2018 through July 31, 2019, inclusive, **on U.S. exchanges or otherwise in domestic transactions in the United States**. Please be sure to include proper documentation with your Claim Form as described in detail in General Instructions, ¶ 6, above. Do not include information in this section regarding securities other than Turquoise Hill call options.

contracts i	n which you h	_Y 17, 2018 – nad an open in If none, check	terest as	of the open				Confirm Proof of Holding Position Enclosed
Strike Price of Ca	ll Option Contrac	ct Option	n Date of 0 n Contract n/Day/Year	t	Option Class Sy	mbol	Which You Ha	Option Contracts in d an Open Interest by short holdings)
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\$		1	1					
\$		1	1					
\$		/	1					
\$		/	1					
each and opening of	every purchas f trading on Jเ		including rough ar	g free receip	ts) of Turquoi the close of tr	se Hill call o	option contrac	– Separately list sts from after the n a domestic
Date of Purchase/ Acquisition (List Chronologically) (Month/Day/Year)	Strike Price of Call Option Contact	Expiration Date of Call Option Contract (Month/Day/ Year)	Option Class Symbol	Number of Call Option Contracts Purchased/ Acquired	Purchase/ Acquisition Price Per Call Option Contract	Total Purcha Acquisition Price (exclude taxes, commission and fees)	n Exercise ling Insert an " Assigne as, Insert an "	ed A" if character of the A" if Character of
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opening o	sale/dispositi	ion (including fully 17, 2018 th	ree deliv	eries) of Tur	quoise Hill ca	II options froi	n after the		IF NON HECK H	
Date of Sale (List Chronologically) (Month/Day/Year)	Strike Price of Call Option Contact	Expiration Date of Call Option Contract (Month/Day/ Year)	Option Class Symbol	Number of Call Option Contracts Sold	Sale Price Per Call Option Contract	Total Sale Pric (excluding taxes, commissions and fees)	Insert an '	ed 'A" if ed 'X" if	(Mont	se Date h/Day/ ear)
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1 1	\$	1 1			\$	\$			/	1
1 1	\$	1 1			\$	\$			/	1
1 1	\$	1 1			\$	\$			/	1
1 1	\$	1 1			\$	\$			/	/
	ou had an op	LY 31, 2019 – en interest as o check here: ⊡.	of the clo					Hol	nfirm Pr ding Po Enclos	sition
Strike Price of Call Option Contract Expiration Date of Option Contract (Month/Day/Year			:	Option Class Sy		Number of Call Which You Ha				
\$		/	1							
\$		/	1							
\$		/	1							
\$		/	1							
\$		/	1							
		•		•		•				
OP'	TIONS YOU I	RE ADDITIONA MUST PHOTO DX, THESE AL	COPY T	HESE PAGE	S AND CHE	CK THE BO	X AT LEFT.			

PART V – SCHEDULE OF TRANSACTIONS IN TURQUOISE HILL PUT OPTIONS

Complete this Part V only if you sold (wrote) put options on Turquoise Hill common stock during the period from July 17, 2018 through July 31, 2019, inclusive, **on U.S. exchanges or otherwise in domestic transactions in the United States**. Please be sure to include proper documentation with your Claim Form as described in detail in General Instructions, ¶ 6, above. Do not include information in this section regarding securities other than put options on Turquoise Hill common stock.

	n which you h	_Y 17, 2018 – nad an open in If none, check	terest as	of the o					Hol	nfirm Proof of ding Position Enclosed
Strike Price of Pu	t Option Contrac	t Option	n Date of I n Contract /Day/Year		0	ption Class Syr	mbol	Which You	Had an C	n Contracts in Open Interest rt holdings)
\$		1	1							
\$		1	1							
\$		1	1							
\$		1	1							
\$		1	1							
every sale July 17, 20	(writing)(incl 018 through a	OM JULY 17, 2 uding free deli nd including th S. exchange.	veries) d le close	of Turquo of trading	oise H g on t	lill put option hrough July	s from afte	r the openi	ng of tra	ading on
Date of Sale (List Chronologically) (Month/Day/Year)	Strike Price of Put Option Contact	Expiration Date of Put Option Contract (Month/Day/ Year)	Option Class Symbol	Number Put Opti Contrac Sold	ion cts	Sale Price Per Put Option Contract	Total Sale P (excluding taxes, commission and fees)	g Assi Insert a Exer Insert a	an "A" if gned an "E" if cised an "X" if ired	Assignment Date (Month/Day/Y ear)
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1 1	\$	1 1				\$	\$			1 1
1 1	\$	1 1				\$	\$			1 1
1 1	\$	1 1				\$	\$			1 1

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Separately put option	y list each and contracts fro	SITIONS JULY d every purcha m after the ope through July 3	se/acqui ening of t	isition (includ trading on Ju	ling free recei ily 17, 2018 th	pts) of Turqu	oise Hill		IF NON HECK H	
Date of Purchase/ Acquisition (List Chronologically) (Month/Day/Year)	Strike Price of Put Option Contact	Expiration Date of Put Option Contract (Month/Day/ Year)	Option Class Symbol	Number of Put Option Contracts Purchased/ Acquired	Purchase/ Acquisition Price Per Put Option Contract	Total Purchase Acquisition Price (excludin taxes, commissions, and fees)	Assigne	ed E" if ed X" if	D (Month	nment ate n/Day/Y ar)
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1 1	\$	1 1			\$	\$			/	1
1 1	\$	/ /			\$	\$			/	1
1 1	\$	/ /			\$	\$			/	1
1 1	\$	1 1			\$	\$			/	1
1 1	\$	1 1			\$	\$			1	1
contracts	in which you l	LY 31, 2019 – had an open in e, check here:	terest as					Hol	nfirm Pr ding Po Enclos	sition
Strike Price of Put Option Contract Opti		ct Optio	n Date of n Contract n/Day/Year	t	Option Class Sy		lumber of Put Which You Ha			
\$		/	1							
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\$		/	1							
		•		•		•				
OP'	TIONS YOU	RE ADDITIONA MUST PHOTO OX, THESE AL	COPY T	HESE PAGE	ES AND CHE	CK THE BOX	(AT LEFT.			

PART VI – RELEASE OF CLAIMS AND SIGNATURE

YOU MUST ALSO READ THE RELEASE AND CERTIFICATION BELOW AND SIGN ON PAGE 13 OF THIS CLAIM FORM.

I (we) hereby acknowledge that, pursuant to the terms set forth in the Stipulation, without further action by anyone, upon the Effective Date of the Settlement, I (we), on behalf of myself (ourselves) and my (our) (the claimant(s)') heirs, executors, administrators, predecessors, successors, and assigns, in their capacities as such, shall be deemed to have, and by operation of law and of the judgment shall have, fully, finally, and forever compromised, settled, released, resolved, relinquished, waived, and discharged each and every Released Plaintiffs' Claim against Defendants and the other Defendants' Releasees, and shall forever be barred and enjoined from prosecuting any or all of the Released Plaintiffs' Claims against any of the Defendants' Releasees.

CERTIFICATION

By signing and submitting this Claim Form, the claimant(s) or the person(s) who represent(s) the claimant(s) agree(s) to the release above and certifies (certify) as follows:

- 1. that I (we) have read and understand the contents of the Notice and this Claim Form, including the releases provided for in the Settlement and the terms of the Plan of Allocation;
- 2. that the claimant(s) is a (are) Settlement Class Member(s), as defined in the Notice, and is (are) not excluded by definition from the Settlement Class as set forth in the Notice;
 - 3. that the claimant(s) did *not* submit a request for exclusion from the Settlement Class;
- 4. that I (we) own(ed) the Turquoise Hill Securities identified in the Claim Form and have not assigned the claim against any of the Defendants or any of the other Defendants' Releasees to another, or that, in signing and submitting this Claim Form, I (we) have the authority to act on behalf of the owner(s) thereof:
- 5. that the claimant(s) has (have) not submitted any other claim covering the same purchases or sales of Turquoise Hill Securities and knows (know) of no other person having done so on the claimant's (claimants') behalf, either in this Action or in any other matter, including the Canadian Class Action:
- 6. that the claimant(s) submit(s) to the jurisdiction of the Court with respect to claimant's (claimants') claim and for purposes of enforcing the releases set forth herein;
- 7. that I (we) agree to furnish such additional information with respect to this Claim Form as Lead Counsel, the Claims Administrator, or the Court may require;
- 8. that the claimant(s) waive(s) the right to trial by jury, to the extent it exists, and agree(s) to the determination by the Court of the validity or amount of this Claim, and waive(s) any right of appeal or review with respect to such determination;
- 9. that I (we) acknowledge that the claimant(s) will be bound by and subject to the terms of any judgment(s) that may be entered in the Action; and

10. that the claimant(s) is (are) NOT subject to backup withholding under the provisions of Section 3406(a)(1)(C) of the Internal Revenue Code because (i) the claimant(s) is (are) exempt from backup withholding or (ii) the claimant(s) has (have) not been notified by the IRS that he, she, or it is subject to backup withholding as a result of a failure to report all interest or dividends or (iii) the IRS has notified the claimant(s) that he, she, or it is no longer subject to backup withholding. If the IRS has notified the claimant(s) that he, she, it, or they is (are) subject to backup withholding, please strike out the language in the preceding sentence indicating that the claim is not subject to backup withholding in the certification above.

UNDER THE PENALTIES OF PERJURY, I (WE) CERTIFY THAT ALL OF THE INFORMATION PROVIDED BY ME (US) ON THIS CLAIM FORM IS TRUE, CORRECT, AND COMPLETE, AND THAT THE DOCUMENTS SUBMITTED HEREWITH ARE TRUE AND CORRECT COPIES OF WHAT THEY PURPORT TO BE.

Signature of Claimant	Date
Print Name of Claimant here	
Signature of Joint Claimant, if any	Date
Print Name of Claimant here	
If the claimant is other than an individual, or is no following also must be provided:	t the person completing this form, the
Signature of person signing on behalf of Claimant	Date
Signature of person signing on behalf of Claimant Print Name of person signing on behalf of Claimant here	Date

REMINDER CHECKLIST



- 1. Sign the above release and certification. If this Claim Form is being made on behalf of joint claimants, then both must sign.
- 2. Attach only *copies* of acceptable supporting documentation as these documents will not be returned to you.





- 3. Do not highlight any portion of the Claim Form or any supporting documents.
- 4. Keep copies of the completed Claim Form and documentation for your own records.





- 5. The Claims Administrator will acknowledge receipt of your Claim Form by mail, within 60 days. Your claim is not deemed filed until you receive an acknowledgement postcard. If you do not receive an acknowledgement postcard within 60 days, please call the Claims Administrator toll free at (855) 779-3513.
- 6. If your address changes in the future, or if this Claim Form was sent to an old or incorrect address, you must send the Claims Administrator written notification of your new address. If you change your name, inform the Claims Administrator.



7. If you have any questions or concerns regarding your claim, contact the Claims Administrator at the address below, by email at info@TurquoiseHillSecuritiesLitigation.com, or by toll-free phone at (855) 779-3513, or you may visit www.TurquoiseHillSecuritiesLitigation.com. DO NOT call Turquoise Hill, Defendants, or their counsel with questions regarding your claim.

THIS CLAIM FORM MUST BE MAILED TO THE CLAIMS ADMINISTRATOR BY FIRST-CLASS MAIL OR SUBMITTED ONLINE AT www.turquoiseHillSecuritiesLitigation.com, pOSTMARKED (OR RECEIVED) NO LATER THAN SEPTEMBER 24, 2025. IF MAILED, THE CLAIM FORM SHOULD BE ADDRESSED AS FOLLOWS:

Turquoise Hill Securities Litigation c/o JND Legal Administration P.O. 91153 Seattle, WA 98111

A Claim Form received by the Claims Administrator shall be deemed to have been submitted when posted, if a postmark date on or before **September 24, 2025**, is indicated on the envelope and it is mailed First Class, and addressed in accordance with the above instructions. In all other cases, a Claim Form shall be deemed to have been submitted when actually received by the Claims Administrator.

You should be aware that it will take a significant amount of time to fully process all of the Claim Forms. Please be patient and notify the Claims Administrator of any change of address.