

Cerence Securities Litigation

ELECTRONIC CLAIM FILING GUIDELINES



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Electronic Claim Filing applies to institutions or entities that are filing multiple Claims on behalf of themselves and/or others, as well as individuals or entities that are filing Claims with a large number of transactions (50+).

Electronic Claim Filings are subject to rejection if not prepared in compliance with these Electronic Claim Filing Guidelines.

PLEASE NOTE: No Electronic Claim Filing will be considered to have been properly submitted unless the Claims Administrator issues to the filer a written acknowledgment of receipt and acceptance of electronically submitted data.

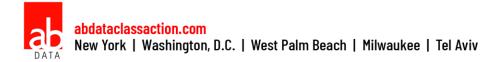
Electronic Filing Requirements

Complete and Sign a Proof of Claim and Release Form:

- One executed Proof of Claim and Release Form should be completed per submission. This Proof of Claim and Release Form serves as a master Proof of Claim and Release for one or all of the accounts included on your file. The Proof of Claim and Release Form is attached hereto as Appendix B.
- 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, her or their 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 Cerence common stock made on behalf of a single beneficial owner.
- Complete the first page of the Proof of Claim and Release Form. Be sure to include company name, account name/number, and company address. If submitting an electronic file on behalf of several accounts, enter "Various Accounts" for the account name/number.
- Complete the signature page on the Proof of Claim and Release Form. If you are filing on behalf of your clients, you must include a letter or document providing your authorization to sign on behalf of your clients, as set forth in Appendix C.
- A valid email address must be on file with the Claims Administrator. Communication regarding deficiencies and rejections on electronically filed claims may be conducted by email. A valid email address MUST be included on the Proof of Claim and Release Form, and the email address provided MUST be updated in the event the contact person or email address changes; it is the sole responsibility of the filing party to maintain upto-date, complete contact information with the Claims Administrator.

Prepare a cover letter:

• A cover letter MUST be included with the master Proof of Claim and Release Form. The cover letter must include the total number of accounts; total number of transactions; total number of shares purchased, acquired, and sold; and contact name(s) with phone number(s) and email address(es). Please see the sample cover letter as set forth in Appendix D.



Prepare a data file:

- An Excel spreadsheet or other electronic file containing account information and transactional data MUST be prepared in accordance with A.B. Data, Ltd.'s Electronic Claim Filing Template Mapping Instructions found in Appendix E. The following formats are acceptable: a) MEDIA: CD, DVD, and FLASH DRIVE and
 b) DATA: ASCII, MS EXCEL, and MS ACCESS. For your convenience, an Excel spreadsheet template is available for your use and may be downloaded from www.CerenceSecuritiesLitigation.com.
- If you cannot provide the information in the aforementioned formats or you have other requests, questions, concerns, or comments, please email A.B. Data, Ltd., at efiling@abdata.com or you may call 877-411-4801 to speak to an Electronic Claims Filing Specialist.

Mail your executed master Proof of Claim and Release with a cover letter and media format to:

CERENCE SECURITIES LITIGATION ATTN: ELECTRONIC CLAIMS DEPARTMENT C/O A.B. DATA, LTD. PO BOX 173038 MILWAUKEE, WI 53217

Or:

CERENCE SECURITIES LITIGATION ATTN: ELECTRONIC CLAIMS DEPARTMENT C/O A.B. DATA, LTD. 3410 WEST HOPKINS STREET MILWAUKEE, WI 53216

Documentation Requirements

A.B. Data, Ltd., reserves the right to request additional documentation at any time after your Proof of Claim and Release Form and file have been received and processed. The documentation provided should be sufficient to verify the validity and accuracy of the data provided in the file.

If you provided a letter/affidavit attesting to the truth and accuracy of your data when initially submitting your file, A.B. Data may still require specific documentary evidence (trade confirmations, monthly statement, or equivalent) to verify the details of your transactions and/or holdings.

How to account for Free Receipts, Free Deliveries, and Transfers

Free receipt, free delivery, and transfer transactions are not eligible for payment unless you have additional information regarding the original purchase, acquisition, or subsequent sale. If you do not have this information, free receipt, free delivery, and transfer transactions should only be included on your electronic file for balancing purposes. You MUST use the following instructions when filing for accounts that have free receipt, free delivery, and transfer transactions electronic file for balancing burges. You MUST use the following instructions when filing for accounts that have free receipt, free delivery, and transfer transactions during the Class Period:

If shares were transferred to or from a different custodian (corresponding account is not on your electronic file), you must follow these instructions:

• SHARES RECEIVED INTO ACCOUNT: You must account for any received shares by providing the opening position or original purchase or acquisition of these shares from the prior account.



- SHARES DELIVERED OUT OF ACCOUNT: You must account for any delivered shares by providing the sale and/or closing position from the subsequent account.
- NO INFORMATION AVAILABLE ON ORIGINAL PURCHASE/ACQUISITION or SUBSEQUENT SALE: You must provide the free receipt and/or free delivery shares in order to balance your claim. A "transfer in" should be reflected as transaction type "FR," and a "transfer out" should be reflected as transaction type "FD" (prices and net amounts should be zero).

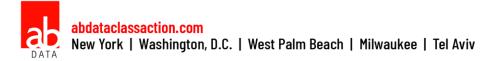
If shares were transferred between accounts on your file, you must follow these instructions:

- DO NOT claim the same purchase or acquisition transaction(s) on both accounts.
- The account that owned the shares most recently should be the account claiming the eligible purchase or acquisition. These shares should already be accounted for in the sales and/or closing position of the most recent account.
- If shares were transferred between accounts for the same beneficial owner on your file, you must combine these accounts and file all eligible purchases, acquisitions, and sales in a single claim. You must also include all opening and closing positions on the claim for that entity.
- If you are unable to combine these accounts accordingly, you must provide the free receipt and free delivery shares in order to balance your claim. A "transfer in" should be reflected as transaction type "FR," and a "transfer out" should be reflected as transaction type "FD" (prices and net amounts should be zero).

Claim Balancing

Each Claim must balance. This means all purchases / acquisitions (including free receipts) of Cerence common stock from November 16, 2020 through and including May 6, 2022, MUST EQUAL the total sales (including free deliveries) from November 16, 2020 through and including May 6, 2022 plus the closing position. (**O+P+FR=S+FD+C**).

Negative values may only be given for short opening or closing positions. All other transactions must be positive values.



Appendix A

Case Specific Information

CLASS DEFINITION:	All Persons who purchased or otherwise acquired the common stock of Cerence Inc. during the period from November 16, 2020 through February 4, 2022, inclusive, and were damaged thereby.
CLAIM FILING DEADLINE:	JANUARY 30, 2025

The following is a list of eligible Securities:

SECURITY	TICKER	CUSIP	ISIN		
CERENCE COMMON STOCK	CRNC	156727109	U1567271093		



Transaction Type	Definition	Valid Dates
0	Total shares owned at opening of trading at beginning of Class Period	November 16, 2020
Р	Purchases/acquisitions during the Class Period or 90-day look back period	November 16, 2020 – May 6, 2022
FR	Transfer into account during the Class Period or 90-day look back period	November 16, 2020 – May 6, 2022
S	Sales during the Class Period or 90-day lookback period	November 16, 2020 – May 6, 2022
FD	Transfer out of account during the Class Period or 90-day look back period	November 16, 2020 – May 6, 2022
С	Total shares owned at close of trading at end of the 90-day look back period	May 6, 2022

*******Please see Appendix E for mapping instructions detailing how to properly submit your file. Files submitted that do not follow the mapping instructions are subject to rejection.



Appendix B



Cerence Securities Litigation Toll-Free Number: (877) 411-4801 Email: info@CerenceSecuritiesLitigation.com Website: www.CerenceSecuritiesLitigation.com

PROOF OF CLAIM AND RELEASE FORM

To be eligible to receive a share of the Net Settlement Fund in connection with the Settlement of this Litigation, 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 <u>www.CerenceSecuritiesLitigation.com</u>, with supporting documentation, *postmarked* (if mailed) or submitted online no later than January 30, 2025.

Mail to:

Cerence Securities Litigation c/o A.B. Data, Ltd. P.O. Box 173038 Milwaukee, WI 53217

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 Litigation, or their counsel. Submit your Claim Form only to the Claims Administrator at the address set forth above.

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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.

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PART II – GENERAL INSTRUCTIONS

1. It is important that you completely read and understand 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. Other definitions of defined terms indicated by initial capital letters are set forth in the Stipulation and Agreement of Settlement dated September 6, 2024 ("Stipulation"), and available at <u>www.CerenceSecuritiesLitigation.com</u>. 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 5 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 Part III of this Claim Form, provide all of the requested information with respect to your holdings, purchases, acquisitions, and sales of Cerence common stock (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 period may result in the rejection of your claim.

5. <u>Please note</u>: Only purchases or acquisitions of the common stock of Cerence Inc. ("Cerence") from November 16, 2020 through February 4, 2022, inclusive, are eligible under the Settlement and the proposed Plan of Allocation set forth in the Notice. However, under the "90-day look-back period" (described in the Plan of Allocation), sales of Cerence common stock during the period from February 5, 2022 through the close of trading on May 6, 2022 will be used for purposes of calculating Recognized Loss Amounts under the Plan of Allocation. Therefore, in order for the Claims Administrator to be able to balance your claim, the requested purchase information during this period must also be provided.

6. You are required to submit genuine and sufficient documentation for all of your transactions in and holdings of Cerence common stock set forth in the Schedule of Transactions in Part III. 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. The Parties and the Claims Administrator do not independently have information about your investments in Cerence common stock. 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 Cerence common stock. The complete name(s) of the beneficial owner(s) must be entered. If you held the Cerence common stock in your own name, you were the beneficial owner as well as the record owner. If, however, your shares of Cerence common stock 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, her or their 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 Cerence common stock 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 Cerence common stock; 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 Cerence common stock 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, A.B. Data, Ltd., at the above address, by email at info@CerenceSecuritiesLitigation.com, or by toll-free phone at (877) 411-4801, or you can visit the website, www.CerenceSecuritiesLitigation.com, where copies of the Claim Form and Notice are available for downloading.

16. 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 <u>www.CerenceSecuritiesLitigation.com</u> or you may email the Claims Administrator's electronic filing department at info@CerenceSecuritiesLitigation.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, you should contact the electronic filing department at info@CerenceSecuritiesLitigation.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 (877) 411-4801.

PART III – SCHEDULE OF TRANSACTIONS IN CERENCE COMMON STOCK

The only eligible security is the publicly traded common stock of Cerence Inc. ("Cerence"). Cerence trades on the NASDAQ under the ticker symbol CRNC. Its CUSIP is 156727109. Do not include information regarding securities other than Cerence common stock. Please include proper documentation with your Claim Form as described in detail in Part II - General Instructions ¶ 6, above.

1. HOLDINGS AS OF NOVEMBER 16, 2020 – State the total number of shares of Cerence common	Confirm Proof of
stock held as of the opening of trading on November 16, 2020. (Must be documented.) If none, write	Position Enclosed
"zero" or "0."	

2. PURCHASES/ACQUISITIONS FROM NOVEMBER 16, 2020 THROUGH FEBRUARY 4, 2022 - Separately list each and every purchase or acquisition (including free receipts) of Cerence common stock from November 16, 2020 through the close of trading on February 4, 2022. (Must be documented.)

Date of Purchase/	Number of Shares	Purchase/Acquisition	Total Purchase/	Confirm Proof of		
Acquisition	Purchased/Acquired	Price Per Share	Acquisition Price	Purchase Enclosed		
(List Chronologically)	•		(excluding any taxes,			
(Month/Day/Year)			commissions, and fees)			
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3. PURCHASES/ACQUISITIONS FROM FEBRUARY 5, 2022 THROUGH MAY 6, 2022 – State the total number of shares of Cerence common stock purchased or acquired (including free receipts) from February 5, 2022 through the close of trading on May 6, 2022. If none, write "zero" or "0."

4. SALES FROM NOVEMBER 16, 2020 THROUGH MAY 6, 2022 – Separately list each and IF NONE. every sale or disposition (including free deliveries) of Cerence common stock from November 16, 2020 **CHECK HERE** through the close of trading on May 6, 2022. (Must be documented.)

Date of Sale (List Chronologically) (Month/Day/Year)	Number of Shares Sold	Sale Price Per Share	Total Sale Price (not deducting any taxes, commissions, and fees)	Confirm Proof of Sale Enclosed
/ /		\$	\$	
/ /		\$	\$	
/ /		\$	\$	
/ /		\$	\$	
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5. HOLDINGS AS OF MAY 6, 2022 – State the total number of shares of Cerence common stock Confirm Proof of held as of the close of trading on May 6, 2022. (Must be documented.) If none, write "zero" or "0." **Position Enclosed**

IF YOU REQUIRE ADDITIONAL SPACE FOR THE SCHEDULE ABOVE, ATTACH EXTRA SCHEDULES IN THE SAME FORMAT. PRINT THE BENEFICIAL OWNER'S FULL NAME AND LAST FOUR DIGITS OF SOCIAL SECURITY/TAXPAYER IDENTIFICATION NUMBER ON EACH ADDITIONAL PAGE. IF YOU DO ATTACH EXTRA SCHEDULES, CHECK THIS BOX.

PART IV - RELEASE OF CLAIMS, CERTIFICATION, AND SIGNATURE

YOU MUST ALSO READ THE RELEASE AND CERTIFICATION BELOW AND SIGN ON PAGE 7 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)') respective officers, directors, shareholders, employees, agents, personal representatives, spouses, subsidiaries, trustees, heirs, executors, administrators, successors and assigns, and any other Person claiming (now or in the future) to be acting on behalf of any of them, in their capacities as such, shall be deemed to have, and by operation of the Judgment shall have, fully, finally, and released, relinquished, and discharged all Released Plaintiffs' Claims against the Released Defendant Persons, and shall have covenanted not to sue the Released Defendant Persons with respect to all such Released Plaintiffs' Claims, and shall be permanently barred and enjoined from instituting, commencing, participating in, continuing, maintaining, asserting or prosecuting, whether directly or indirectly, whether in the United States or elsewhere, whether on their own behalf or on behalf of any other Person, any Released Plaintiff's Claim against the Released Defendant Persons.

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 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 Cerence common stock identified in the Claim Form and have not assigned the claim against any of the Defendants or any of the other Released Defendant Persons 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 of Cerence common stock and knows (know) of no other person having done so on the claimant's (claimants') behalf;

6. that the claimant(s) has (have) not assigned or transferred or purported to assign or transfer, voluntarily or involuntarily, any Released Plaintiffs' Claim against any of the Released Defendant Persons;

7. that the claimant(s) submit(s) to the jurisdiction of the United States District Court for the District of Massachusetts with respect to claimant's (claimants') claim and for purposes of enforcing the releases set forth herein;

8. 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;

9. 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;

10. 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 Litigation; and

11. 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 UNDER THE LAWS OF THE UNITED STATES OF AMERICA, 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 claimant name here	
Signature of joint claimant, if any	Date
Print joint claimant name here	
If the claimant is other than an individual, or is not the person provided:	completing this form, the following also must be

Signature of person signing on behalf of claimant

Print name of person signing on behalf of claimant here

Capacity of person signing on behalf of claimant, if other than an individual, *e.g.*, executor, president, trustee, custodian, etc. (Must provide evidence of authority to act on behalf of claimant – see ¶ 10 on page 3 of this Claim Form.)

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 (877) 411-4801.
- 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.
- If you have any questions or concerns regarding your claim, contact the Claims Administrator at the address below, by email at info@CerenceSecuritiesLitigation.com, or by toll-free phone at (877) 411-4801, or you may visit <u>www.CerenceSecuritiesLitigation.com</u>. DO NOT call Cerence, the other 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 to <u>www.CerenceSecuritiesLitigation.com</u>, postmarked (or submitted online) no later than January 30, 2025. If mailed, the Claim Form should be addressed as follows:

Cerence Securities Litigation c/o A.B. Data, Ltd. P.O. Box 173038 Milwaukee, WI 53217

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.

Appendix C

Authorization Requirements

If you are a nominee filing on behalf of your account holders, you must include the following documentation:

- Affidavit attesting that your entity has legal rights and authorization from your account holders to file Proofs of Claim and Release on their behalf **and** that your account holders understand that they are bound by and subject to the terms of all releases that may be entered in this Cerence Securities Litigation etc.; and
- Authorization to sign on your account holders' behalf.

If you are a third party filing on behalf of a nominee, you must include an Affidavit attesting to the following:

- Your entity has the legal right and authorization from the nominee to file and sign any Proofs of Claim and Release on their behalf;
- Your entity has the legal right and authorization from the nominee's account holders to file and sign any Proofs of Claim and Release on their behalf; and
- The account holders understand they are bound by and subject to the terms of all releases that may be entered in the Action.

If you are a third party filing on behalf of another party, you must include an Affidavit attesting to the following:

- Your entity has the legal right and authorization from the other party to file and sign any Proofs of Claim and Release on its behalf; and
- The other party understands it is bound by and subject to the terms of all releases that may be entered in the Action.

If you are not a nominee or a third party and would like to file claims electronically, you must include documentation supporting all transactional data of your claim as follows:

Documents may include, but are not limited to, a) photocopies of stockbrokers' confirmation slips; b) photocopies of stockbrokers' monthly statements reflecting ALL transactional data and how it was compiled for the opening of the Class Period through the end of the Class Period; or c) a signed letter from your broker, on their letterhead, providing all of the information that would be found on a confirmation slip and/or other aforementioned documents.

Appendix D

Sample Cover Letter

LETTERHEAD

Re: Cerence Securities Litigation

Date:

Enclosed is a fully executed master Proof of Claim and Release Form with required authorizations and affidavits as well as an electronic media attachment, which is being filed in connection with the above-referenced matter on behalf of [COMPANY NAME(S) OR INDIVIDUAL NAME(S)] for the proprietary accounts of [ENTITY].

We, [ENTITY], hereby agree that further communication from the Claims Administrator may be conducted by email, and we accept sole responsibility to ensure the email address for [ENTITY] is updated in the event the email address provided on the master Proof of Claim and Release should change.

The attachment consists of a [CD, DVD, OR FLASH DRIVE] containing [NUMBER] accounts/claims in [ASCII, MS EXCEL, OR MS ACCESS] format with [NUMBER OF TRANSACTIONS] transactions for Cerence Common Stock as well as the closing positions held for [ENTITY]'s proprietary accounts. Each transaction contains corresponding account information for which the claims are being filed.

The total number of Cerence common stock shares purchased or acquired [##.##] for the amount of [\$0.0000] and Cerence common stock shares sold [##.##] for the amount of [\$0.0000] can be found on the enclosed [CD, DVD, OR FLASH DRIVE].

We, [ENTITY], attest that the data provided on the media attachment corresponds to [ENTITY]'s internal records.

I attest that the above information is true and correct.

Signature

Company Name

Job Title

Contact Information (including telephone number, fax number, and email address).



Appendix E

Electronic Claim Filing Template Mapping Instructions

Column	Field Name	Max Length	CERENCE COMMON STOCK
		Lengui	FIELD DESCRIPTION
А	Account Number	40	Account number associated with the proprietary account for which transactions are being submitted with this Proof of Claim and Release.
В	Account Name	40	Name of individual, company, or entity associated with the account listed in Column A.
С	Full Name of the Beneficial Owner	40	Full name of the beneficial owner associated with the account listed in Column A.
D	TIN of the Beneficial Owner	9	Taxpayer identification number (TIN) for beneficial owner, no spaces and no dashes.
Е	Beneficial Owner TIN Type (E/S/U/F)	1	\mathbf{E} = Employer Identification Number (EIN); \mathbf{S} = Social Security Number (SSN); \mathbf{U} = Unknown; \mathbf{F} = Foreign.
F	Care of:	40	Name of the entity to which items should be mailed.
G	Attn:	40	Name of the person to whose attention items should be mailed.
Н	Street 1	40	Street Address 1
Ι	Street 2	40	Street Address 2
J	City	25	City
Κ	State	2	State
L	Zip Code	5	Zip code
М	Province	40	Province
Ν	Country	40	Country
0	CUSIP/ISIN	10	CUSIP number or ISIN for common stock.
Р	Transaction Type/Holdings	2	O = Opening position - shares held at opening of trading on November 16, 2020 $P = Purchases made between November 16, 2020 through May 6, 2022, inclusive; FR = Free receipts made between November 16, 2020 through May 6, 2022, inclusive; S = Sales made between November 16, 2020 through May 6, 2022 inclusive; FD = Free deliveries made between November 16, 2020 through May 6, 2022, inclusive; C = Closing position - shares held at close of trading on May 6, 2022$
Q	Trade Date (MM/DD/YYYY)	10	Trade date for transaction or holding date for closing position.
R	Number of Shares of Stock	19	Number of shares associated with a transaction. No commas: use decimal point if needed. Up to four digits after decimal point.
S	Price Per Share EXCLUDING Commissions/Taxes/Fees	19	Price per share (USD), excluding commissions/taxes/fees, associated with a transaction. No dollar sign, no commas; use decimal point, if needed. Up to four digits after decimal point. Leave blank when providing closing positions. Use zero when specifying free receipts and/or free deliveries.
Т	Total Price EXCLUDING Commissions/Taxes/Fees	19	Aggregate cost or proceeds received (USD), excluding commissions/taxes/fees. No dollar sign, no commas; use decimal point, if needed. Up to four digits after decimal point. Use zero when specifying free receipts and/or free deliveries.

*All eligible common shares for each account must balance. This means that the opening position plus total purchases, and free receipts during the Class Period and Lookback Period MUST EQUAL the total sales and free deliveries during the Class Period and Lookback Period plus the closing position (O+P+FR+=S+FD+C).

*You MUST include a cover letter with your electronic file that provides the total number of accounts; total number of transactions; total number of purchases and sales; and contact name(s) with phone number(s) and email address(es) in the event that we have any questions or require further information. See Appendix D for a sample cover letter. Any electronic files not in accordance with these Electronic Claims Filing Guidelines are subject to rejection.

Free Receipts and Free Deliveries are provided to balance your claim and will not result in a Recognized Loss under the Plan of Allocation. The original purchase and/or sale information relating to these shares must be provided in your original filing in order to be eligible under the Plan of Allocation. There will be no further attempt to collect transactional information regarding Free Receipts/Deliveries included in the filing.

