GPC Settlement Administrator c/o Rust Consulting Inc - 5765 PO Box 44 Minneapolis MN 55440-0044

IMPORTANT LEGAL MATERIALS FOR ADULT RESIDENTS AND DEPENDENTS



<<Name 1>> <<Name 2>> <<Name 3>> <<Name 4>> <<Address 1>> <<Address 2>> <<City>> <<State>> <<Zip 10>> <<CountryName>>

THE SETTLEMENT NOTICE CONTAINS IMPORTANT INFORMATION ABOUT THE CLAIMS PROCESS. BEFORE FILLING OUT YOUR CLAIM FORM, PLEASE READ IT CAREFULLY.

Instructions For Completing Grain Processing Corporation Settlement Claim Form

If you believe you are a Class Member and wish to seek payment under the Settlement, you must submit this Claim Form to the Settlement Administrator at:

GPC Settlement Administrator c/o Rust Consulting Inc - 5765 PO Box 44 Minneapolis MN 55440-0044

Your claim must be postmarked no later than **March 19, 2019**. If you submit your claims form after this date, you will not be eligible to receive any monetary award.

Please be sure to provide *all* the requested documentation the Form requests. Claims without documentation will be denied.

A separate Claim Form needs to be submitted for each Claimant requesting payment. If you are seeking payment for both yourself and for someone else, you need to submit separate Forms – one for yourself and one for each additional Claimant. For example, a family of four would need to submit four separate forms. Any payments awarded will be made separately to each individual Successful Claimant.

If a Claimant is (1) a minor, (2) deceased, (3) incapacitated (legally unable to complete the form), his or her claim form may be completed and submitted by a parent or other legal representative.

If you need any additional forms you can either make copies yourself or obtain them by calling the Settlement Administrator at <u>1-888-952-9083 or visiting www.GPCclassaction.com</u>.

Please answer the following questions legibly and in ink.

Si necesita este formulario en español, comuníquese con el Administrador del Acuerdo para obtener ayuda llamando al 1-888-952-9083, o visite www.GPCclassaction.com.

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GPC Settlement Administrator c/o Rust Consulting Inc - 5765 PO Box 44 Minneapolis MN 55440-0044



<<Name 1>> <<Name 2>> <<Name 3>> <<Address 1>> <<Address 2>> <<City>> <<State>> <<Zip 10>> <<CountryName>> UAA <<SequenceNo>>

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CLAIM FORM

PART 1 - WHO IS THE CLAIMANT

Complete the Claimant Information section below. This information should be provided for either yourself or, if you are completing the Claim Form for someone else, for that other Claimant.

Claimant Information:

First:	Middle:	Las	st:
Claimant's Birth Date:,	//		
Mailing Address:			
City:		State:	Zip Code:
Telephone Number: ()		
Email Address:			
IF YOU AR	E FILLING OUT THE FORM F	OR YOURSELF GO DIRE	CTLY TO PART 2.
IF YOU ARE F	ILLING OUT THE CLAIM FO BELOW BEFORE	R ANOTHER PERSON PL MOVING TO PART 2	EASE FILL OUT THE
	provide the following addit		r a minor, deceased, or otherwise yourself along with documentation ve.
Please Check One of the Followin	-	U	
А	Minor Decease	d Incapacita	ted
Your Full Legal Name:			
Your Relationship to the Claiman	.t:		
Your Mailing Address:			
City:		State:	Zip Code:
Your Telephone Number: ()		
Your Email Address:			
	∭ ∭		



Decidence 1

PART 2 - WHERE DID THE CLAIMANT LIVE?

Complete this section whether you are submitting this Form for yourself or someone else. If you are filling the Form out for someone else, read YOU as referring to that other person.

List any addresses within the Class Area where you (the Claimant) lived between **April 24, 2007** and **December 31, 2017**. Be sure to include apartment # or unit #.

A Class Area Boundary Map is attached to the Settlement Notice for your reference. More detailed maps can be found at www.GPCclassaction.com.

Do **not** list any properties outside the Class Area boundary.

Do <u>not</u> list properties where you lived only before or only after the Class Definition Period (before April 24, 2007 or after September 1, 2017).

<u>Residence i</u>			
Street Address:			
City:	State:	Zip Code:	
Date Moved In: / / / /			
Do you still live at this address? Yes No			
If not, Date Moved Out: / / /			
Status at this address (Please Check One):			
Owner/Renter Child/Grandchild/Spouse/Parent/Grandpare	ent of an Owner or Rei	nter	
Other Dependent of Owner/Renter (describe)			
If you are not the Owner/Renter please list the Owner(s)/Renter(s)	of the property:		
Residence 2			
Street Address:			
City:	State:	Zip Code:	
Date Moved In: / / /			
Do you still live at this address? Yes No			
If not, Date Moved Out: / / /			
Status at this address:			
Owner/Renter Child/Grandchild/Spouse/Parent/Grandpare	ent		
Other Dependent of Owner/Renter (describe)			
If you are not the Owner/Renter please list the Owner(s)/Renter(s)	of the property:		



Residence 3

Street Address:		
City:	_ State:	_ Zip Code:
Date Moved In: / / /		
Do you still live at this address? Yes No		
If not, Date Moved Out: / / /		
Status at this address:		
Owner/Renter Child/Grandchild/Spouse/Parent/Grandparent		
Other Dependent of Owner/Renter (describe)		
If you are not the Owner/Renter please list the Owner(s)/Renter(s) of the pro-	operty:	

Attach another page with additional addresses if needed.

Part 3: DOCUMENTATION REQUIREMENTS

All claims require documentation that you (the Claimant) were either the Owner, Renter, or a Dependent at each residence you listed in Part 2.

Do not send original documents. Documents will not be returned.

WERE YOU (THE CLAIMANT) AN OWNER, RENTER OR DEPENDENT?

You were an *Owner* if you had either legal or equitable title to the property.

You were a *Renter* if you paid money or provided other value (for example, services, home furnishings or other things of value to the household) in exchange for the right to live at the property.

You were a *Dependent* if you (1) were without financial means to live independently, (2) depended on an Owner or Renter for financial support, and (3) Physically Resided with the Owner or Renter at the Eligible Residence (as his or her principal residence) during the Class Period. The Settlement Administrator will presume you were a Dependent if you can document that you were a child, grandchild, parent, spouse or grandparent of the Owner or Renter.

A. Proof You were an Owner/Renter of the Property

If you were an Owner or Renter, please submit sufficient evidence to demonstrate that you were an Owner or Renter of each property you listed above. Below are types of evidence that can be used as proof of your status as an Owner or Renter (in order of preference). If you claim you lived at multiple qualifying addresses during between April 24, 2007 and December 31, 2017, please include separate documentation for each address you claim.

- Property Deed or Purchase Contract; or
- Mortgage; or
- A lease or rental agreement identifying you (the Claimant) as a tenant of the property, or
- A utility company customer record or bill for gas, electricity, telephone, cable, internet services, or other utilities at the property, dated during the Class Definition Period; or
- Bank records (canceled checks, check images, etc.) showing that you (the Claimant) paid for rent, gas, electricity, telephone, cable, internet services, or other utilities at the property, dated during the Class Definition Period; or
- A statement signed under penalty of perjury, from someone who did not live with you (the Claimant), stating that you (the Claimant) lived at the property and provided money or other value or services (groceries, home furnishings, house cleaning or maintenance, care for a family member, etc.) in exchange for the right to live at the property. A sample declaration can be obtained by visiting www.GPCclassaction.com or contacting the Settlement Administrator; or
- Other documentation the Settlement Administrator deems reliable to show Owner or Renter status.



B. Proof the Claimant was a Dependent of the Property Owner/Renter

If you were a Dependent of an Owner or Renter, you can document your dependent status in one of two ways.

- 1. The first way is to prove that you (the Claimant) are the Child/Grandchild/Spouse/ Parent/Grandparent of the Owner or Renter of the Property. To document this, please provide one or more of the following:
 - Birth Certificate; or
 - Adoption Decree; or
 - Marriage License or Marriage Certificate; or
 - Official School Record; or
 - Court Documentation; or
 - · Baptismal Certificate or other church or religious record indicating family status; or
 - Statement signed under penalty of perjury from a parent that dependent child is their child over whom they have legal custody; or
 - Statement signed under penalty of perjury from someone who did not live with you (the Claimant) and who has personal knowledge of the family relationship. A sample declaration can be obtained by visiting GPCclassaction.com or contacting the Settlement Administrator; or
 - Other document the Settlement Administrator deems reliable to prove the relationship.
- 2. The second way to prove you (the Claimant) were a dependent of the Owner/Renter of the property is to prove that you lacked financial means to live independently and depended on the Owner or Renter for financial support. To document this, please provide one or more of the following:
 - Financial records showing your dependency on the Owner(s)/Renter(s); or
 - A Statement signed under penalty of perjury from someone who did not live with you (the Claimant) and who has personal knowledge of the relationship. A sample declaration can be obtained by visiting www.GPCclassaction.com or contacting the Settlement Administrator; or
 - Other document the Settlement Administrator deems reliable to prove your dependent status.

Note: If the Owner/Renter of the property in question is not submitting a claim form for himself or herself, then you (the Dependent) must also provide documentation that that person owned or rented the property in question.

C. Proof of How Long You Lived at the Property or Properties

In Part 2, you listed the dates you lived in each Eligible Property. In order to receive a payment, you must provide documentation that you lived at the given property *for each year* you claim. Your claim will only be approved for years that are properly documented.

If you were the Owner or Renter of the property, please provide one or more of the following to document your residence <u>for each</u> <u>year</u> the Claimant lived at the property:

- Any tax form showing that you listed the property as your primary residence (you may redact income information); or
- A lease or rental agreement identifying you as a tenant at that location during the period of residence you listed; or
- Any bill (for example, rent bill, credit card bill, utility bill, tax bill) showing your billing address at the property for the dates listed; or
- A driver's license, Voter ID, government ID, Veterans ID, Tribal ID or other license or ID showing your residence at the property during the dates listed; or
- A change of address request to the address provided, approved by the Post Office; or
- A statement signed under penalty of perjury from someone who did not live with you, attesting to your residence at the property during the dates listed. A sample declaration can be obtained by visiting www.GPCclassaction.com or contacting the Settlement Administrator; or
- Other document the Settlement Administrator deems reliable to establish the dates of residence.

If you lived at the property as a dependent of the Owner or Renter (either as Spouse/Child/Grandchild/Parent/Grandparent *or as any other dependent*) please provide one or more of the following to document residence for each year you claim you lived at the property:

- · Custody agreement or other court document showing family relationship; or
- Tax form(s) showing the listed property as your primary residence; or
- A change of address request to the address provided, approved by the Post Office; or
- A statement signed under penalty of perjury from someone who did not live with you, attesting to your residence at the property during the dates listed. A sample declaration can be obtained by visiting www.GPCclassaction.com or contacting the Settlement Administrator; or
- Other document the Settlement Administrator deems reliable to establish the dates of residence.



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Part 4: Proof of Authority to File on Behalf of Another Person.

If you are completing this Claim Form on behalf of someone else, who is either a minor, deceased, or otherwise legally incapacitated, you must also provide proof or appropriate documentation that you are the legal representative of the person named as the Claimant.

- If the Claimant is a minor child, please make sure you checked Child/Grandchild as the residency status and include one of the forms of proof listed in the Proof of Residency Dependent section above.
- If the Claimant is an adult who is deceased, please provide a death certificate and documents showing you are the Executor or Personal Representative of the Estate.
- If the Claimant is an adult who is legally incapacitated, please include a Power of Attorney showing you are authorized to act on the Claimant's behalf.

Signature

By submitting this form, I confirm under penalty of perjury that the information provided above is true and correct, and that I am 18 or older and am authorized to make this Claim on behalf of myself or am the legal representative of the Claimant.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications to avoid backup withholding.

Date:	Signature:

If the claimant is a minor child, you must identify both parents or legal guardians and have them sign here, agreeing to have the Claimant's payment mailed to Claimant c/o the first legal guardian listed.

First Guardian/Parent 1:
Address:
Signature:
Guardian/Parent 2:
Address:
Signature:
If fewer than all legal guardians sign this Form, the Court will appoint a Guardian ad Litem to direct the Settlement Administrator where to send payment, with the fee of the Guardian ad Litem to be charged against the Claimant's claim.
If the claimant is now over eighteen but was under eighteen on September 1, 2017, then you must still identify both parents or legal guardians; but the parents and/or legal guardians do not need to sign the form.
First Guardian/Parent 1:
Address:
Guardian/Parent 2:
Address:

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IMPORTANT TAX RETURN DOCUMENT ENCLOSED



<<Name 1>> <<Name 2>> <<Name 3>> <<Name 4>> <<Address 1>> <<Address 2>> <<City>> <<State>> <<Zip 10>> <<CountryName>>

IMPORTANT TAX INFORMATION

If you are not a U.S. citizen or other U.S. person for tax purposes, please cross out certifications 3 and 4 and provide a W-8 or W-8BEN, if appropriate.

Taxpayer Verification (Substitute W-9)		
Enter your Social Security Number:		
Or Enter your TaxPayer ID Number:		
Name used on Federal Income Tax return:		
Exempt payee code (if any): Exemption from FATCA reporting code (if any):		
Tax Identification Certification		
Under penalties of perjury, I certify that:		
1. My Social Security Number or Taxpayer Identification Number shown on this form is correct;		
2. I am not subject to backup withholding due to failure to report interest or dividend income;		
3. I am a U.S. Citizen or other U.S. Person (as defined in the W-9 instructions); and		
4. I am not subject to FATCA reporting because I am a U.S. Person and the account is located within the United States.		
W-9 Signature Date		
Certification Instructions – You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest or dividends on your tax return.		
Important Notes:		
 No tax withholding will be processed unless otherwise instructed. Each Successful Claimant is responsible for any tax consequences resulting from monetary awards received based on the terms of this Settlement. Parties, Class Counsel, and the Settlement Administrator are not providing, and have no obligation or expertise to provide, advice as to the tax consequences of any payments made under this Settlement Agreement. 		





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Did you remember to

- _____ Read the Settlement Notice, which provides key information on the claims process.
- _____ Fully complete the Claimant Information section of this form.
- Provide your own name and contact information if you are filling out the form for a minor child or a claimant who is legally incapacitated or deceased.
- List all residences within the Class Area during the period from April 24, 2007 through December 31, 2017.
- Provide documentation that you (the Claimant) were an Owner, Renter, or Dependent for each address you listed on the form.
- _____ Provide documentation showing you (the Claimant) lived at each address for each of the years of residency listed.
- _____ Sign and date the claim form.
- List the name and address of both parents or legal guardians for minor children. Both parents must sign the form or else a guardian ad litem will be appointed (the cost of which will be deducted from any claim you are eligible to receive).
- ____ Complete and sign the Substitute W-9.