



Humanigen, Inc. Securities Litigation

ELECTRONIC CLAIM FILING GUIDELINES



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Overview

Electronic Claim Filing applies to institutions or entities that are filing multiple Proofs of Claim and Release on behalf of themselves and/or others, as well as individuals or entities that are filing Proofs of Claim and Release 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:

- One executed Proof of Claim and Release should be completed per submission. This Proof of Claim and Release 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 is attached hereto as Appendix B.
- Separate Claims should be submitted for each separate legal entity (*e.g.*, a claim from joint owners should not include separate transactions of just one of the joint owners, and an individual should not combine his or her IRA transactions with transactions made solely in the individual's name). Conversely, a single Claim should be submitted on behalf of one legal entity including all transactions made by that entity, no matter how many separate accounts that entity has (*e.g.*, a corporation with multiple brokerage accounts should include all transactions made in all accounts on one Claim).
- Complete the first page of the Proof of Claim and Release. 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. 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, 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 up-to-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. 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 Claim 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 ("A.B. Data Template") and may be downloaded from www.HumanigenSecuritiesLitigation.com.

NOTE: If you prepare your own Excel spreadsheet or other electronic claim file, it MUST contain each of the fields that appear in the A.B. Data Template, the fields must be in the same order as they appear in the A.B. Data Template, and each file must contain the same descriptive headings as appear in the A.B. Data Template

- 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) 354-3785 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:

HUMANIGEN, INC. SECURITIES LITIGATION
ATTN: ELECTRONIC CLAIMS DEPARTMENT
C/O A.B. DATA, LTD.
PO BOX 173107
MILWAUKEE, WI 53217

Or:

HUMANIGEN, INC. SECURITIES LITIGATION
ATTN: ELECTRONIC CLAIMS DEPARTMENT
C/O A.B. DATA, LTD.
3410 WEST HOPKINS STREET
MILWAUKEE, WI 53217

Documentation Requirements

A.B. Data, Ltd. and/or Lead Counsel may request additional documentation at any time after your Claim Form and file have been received and processed, even if you provided a letter/affidavit attesting to the truth and accuracy of the data when you initially submitted your file. The documentation will be required to be from an independent source (*e.g.*, trade confirmations, monthly statement, or equivalent) and it must be sufficient to verify the validity and accuracy of the data provided in the file.

**FAILURE TO COMPLY WITH THE REQUEST FOR ADDITIONAL DOCUMENTATION
MAY RESULT IN THE REJECTION OF ALL CLAIMS IN YOUR ELECTRONIC
SUBMISSION.**



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 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

All securities for each Claim must balance. This means the opening position plus all purchases/acquisitions (including free receipts) from May 16, 2020 through October 10, 2022 **MUST EQUAL** the total sales (including free deliveries) from May 16, 2020 through October 10, 2022, plus the closing position. **(O+P+FR=S+FD+C)** for Humanigen, Inc. common stock.

All securities for each Claim must balance. This means the opening position plus all purchases/acquisitions (including free receipts) from May 16, 2020, through and including the July 13, 2022, **MUST EQUAL** the total sales (including free deliveries) from May 16, 2020, through and including the July 13, 2022, plus the closing position. **(O+P+FR=S+FD+C)** for Humanigen, Inc. Call Options.

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 or entities who purchased or otherwise acquired Humanigen Inc. securities from May 16, 2020 to July 12, 2022, inclusive.
CLAIM FILING DEADLINE:	March 7, 2024

The following is a list of eligible Securities:

SECURITY	CUSIP	ISIN	TICKER
Humanigen, Inc. Common Stock	444863203	US4448632038	HGEN
Humanigen, Inc. Call Options			



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Transactions for Humanigen, Inc. Common Stock should include:

Transaction Type	Definition	Valid Dates
O	Total shares owned at the close of trading at the beginning of the Class Period.	May 15, 2020
P	Purchases/acquisitions during the Class Period.	May 16, 2020, through and including October 10, 2022
FR	Transfer into account during the Class Period.	May 16, 2020, through and including October 10, 2022
S	Sales during the Class Period.	May 16, 2020, through and including October 10, 2022
FD	Transfer out of account during the Class Period.	May 16, 2020, through and including October 10, 2022
C	Total shares owned at the close of trading at the end of the Class Period.	October 10, 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.**



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Transactions for Humanigen, Inc. Call Option contracts should include:

Transaction Type	Definition	Valid Dates
O	Total number of Call option contracts held as of the close of trading at the beginning of the Class Period.	May 15, 2020
P	Purchases/acquisitions of Call option contracts during the Class Period.	May 16, 2020, through and including July 13, 2022
FR	Transfer of Call option contracts into account during the Class Period.	May 16, 2020, through and including July 13, 2022
S	Sales of Call option contracts during the Class Period.	May 16, 2020, through and including July 13, 2022
FD	Transfer of Call option contracts out of account during the Class Period.	May 16, 2020, through and including July 13, 2022
C	Total number of Call option contracts held as of the close of trading at the end of the Class Period.	July 13, 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.**



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Appendix B



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**UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY**

IN RE HUMANIGEN, INC.
SECURITIES LITIGATION

Case No. 2:22-cv-05258-WJM-AME

PROOF OF CLAIM AND RELEASE

I. GENERAL INSTRUCTIONS

1. To recover as a member of the Settlement Class based on your claims in the action entitled *In re Humanigen, Inc. Securities Litigation*, Case No. 2:22-cv-05258-WJM-AME (the “Litigation”), you must complete and, on page 7 hereof, sign this Proof of Claim and Release. If you fail to file a properly addressed (as set forth in paragraph 3 below) Proof of Claim and Release, 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 Litigation.¹
2. Submission of this Proof of Claim and Release, however, does not assure that you will share in the proceeds of settlement in the Litigation.
3. YOU MUST MAIL YOUR COMPLETED AND SIGNED PROOF OF CLAIM AND RELEASE POSTMARKED ON OR BEFORE MARCH 7, 2024, ADDRESSED AS FOLLOWS:

HUMANIGEN, INC. SECURITIES LITIGATION

Claims Administrator

c/o A.B. Data, Ltd.

P.O. Box 173107

Milwaukee, WI 53217

(877-354-3785)

Online Submission: www.HumanigenSecuritiesLitigation.com

4. If you are a Settlement Class Member, you are bound by the terms of any judgment entered in the Action, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM AND RELEASE FORM, unless you timely and validly request exclusion from the Settlement Class pursuant to the Notice.

II. CLAIMANT IDENTIFICATION

1. If you purchased or acquired Humanigen securities during the period from May 16, 2020, to July 12, 2022, inclusive, and held the certificate(s) in your name, you are the beneficial purchaser or acquirer as well as the record purchaser or acquirer. 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 purchaser and the third party is a record purchaser.
2. Use Part I of this form entitled “Claimant Identification” to identify each purchaser of record (“nominee”), if different from the beneficial purchaser of Humanigen securities which form the basis of this claim. THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL PURCHASER OR PURCHASERS, OR THE LEGAL REPRESENTATIVE OF SUCH PURCHASER OR PURCHASERS OF THE HUMANIGEN SECURITIES UPON WHICH THIS CLAIM IS BASED.

¹ Unless otherwise stated, all terms used in this Proof of Claim and Release shall have the same meanings as set forth in the Stipulation of Settlement filed with the Court.

3. All joint purchasers must sign this claim. Executors, administrators, guardians, conservators, and trustees must complete and sign this claim on behalf of Persons represented by them; their authority must accompany this claim and their titles or capacities must be stated. 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. CLAIM FORM

1. Use Part II of this form entitled “Schedule of Transactions in Humanigen Securities” to supply all required details of your transaction(s). 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 on each additional sheet.
2. On the schedules, provide all of the requested information with respect to **all** of your purchases or acquisitions and **all** of your sales of Humanigen securities which took place at any time beginning May 16, 2020, through October 10, 2022, whether such transactions resulted in a profit or a loss and even though the Class Period ends on July 12, 2022. Failure to report all such transactions may result in the rejection of your claim.
3. List each transaction in the Class Period separately and in chronological order by trade date, beginning with the earliest. You must accurately provide the month, day, and year of each transaction you list. For option transactions, you must also provide type of contract (*e.g.*, call or put), number of contracts, maturity date, strike price, and transaction type (*e.g.*, buy to open, buy to close, sell to open, sell to close).
4. Broker confirmations or other documentation of your transactions in Humanigen securities should be attached to your claim. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.
5. The above requests are designed to provide the minimum amount of information necessary to process the simplest claims.
6. 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. All such claimants MUST also submit a manually signed paper Proof of Claim and Release, whether or not they also submit electronic copies. If you wish to submit your claim electronically, you must contact the Claims Administrator at info@HumanigenSecuritiesLitigation.com or 1-877-354-3785 to obtain the mandatory file layout.

Any file that does not comply with the required electronic filing format will be subject to rejection. No electronic files will be considered to have been properly submitted unless the Claims Administrator issues to the claimant a written acknowledgment of receipt and acceptance of electronically submitted data. 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 Claims Administrator’s electronic filing department at efiling@abdata.com to inquire about your file and confirm it was received.

**UNITED STATES DISTRICT COURT
DISTRICT OF NEW JERSEY**

In re Humanigen, Inc. Securities Litigation

Case No. 2:22-cv-05258-WJM-AME

PROOF OF CLAIM AND RELEASE

Must be Postmarked No Later Than March 7, 2024.

Please Type or Print.

PART I: CLAIMANT IDENTIFICATION

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 Name (First, Middle, Last)

Joint Beneficial Owner's Name (First, Middle, Last) *(if applicable)*

Record Owner's Name (if different from beneficial owner listed above)

Last 4 digits of Social Security Number or Taxpayer Identification Number

Street Address

City

State/Province

ZIP Code

<input type="text"/>	<input type="text"/>	<input type="text"/>
----------------------	----------------------	----------------------

Foreign Postal Code *(if applicable)*

Foreign Country *(if applicable)*

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Telephone Number (Day)

Telephone Number (Evening)

<input type="text"/>	<input type="text"/>
----------------------	----------------------

Email Address (email address is not required, but if you provide it you authorize the Claims Administrator to use it in providing you with information relevant to this claim)

Type of Beneficial Owner:

Specify one of the following:

- Individual(s) Corporation UGMA Custodian IRA Partnership Estate Trust Other

PART II: SCHEDULE OF TRANSACTIONS IN HUMANIGEN COMMON STOCK

A. HOLDINGS AS OF MAY 15, 2020. State the total number of shares of Humanigen common stock held as of the close of trading on May 15, 2020. If none, write “zero” or “0.” _____.
(Must be documented.)

B. PURCHASES FROM MAY 16, 2020, THROUGH AND INCLUDING OCTOBER 10, 2022. Separately list each purchase or acquisition of Humanigen common stock between May 16, 2020, and October 10, 2022, inclusive. (Must be documented.)

Trade Date (M/D/YY)	Number of Shares Purchased/ Acquired	Price Per Share	Total Purchase/ Acquisition Price
/ /		\$	\$
/ /		\$	\$
/ /		\$	\$
/ /		\$	\$

C. SALES FROM MAY 16, 2020, THROUGH AND INCLUDING OCTOBER 10, 2022. Separately list each sale of Humanigen common stock between May 16, 2020, and October 10, 2022, inclusive. (Must be documented.)

Trade Date (M/D/YY)	Number of Shares Sold	Price Per Share	Total Sale Price
/ /		\$	\$
/ /		\$	\$
/ /		\$	\$
/ /		\$	\$

D. HOLDINGS AS OF OCTOBER 10, 2022. State the total number of shares of Humanigen common stock held as of the close of trading on October 10, 2022. If none, write “zero” or “0.” _____.
(Must be documented.)

PART III: SCHEDULE OF TRANSACTIONS IN HUMANIGEN CALL OPTIONS

A. BEGINNING HOLDINGS – Separately list all positions in Humanigen Call Option contracts in which you had an open interest as of the close of trading on May 15, 2020. (Must be documented.)

Strike Price of Call Option Contract	Expiration Date of Call Option Contract (M/D/YY)	Number of Call Option Contracts in Which You Had an Open Interest
\$	/ /	
\$	/ /	
\$	/ /	
\$	/ /	

B. PURCHASES OF HUMANIGEN CALL OPTIONS – Separately list each purchase/acquisition (including free receipts) of Humanigen Call Option contracts from after the opening of trading on May 16, 2020, through and including the close of trading on July 13, 2022. (Must be documented.)

Purchase Date (M/D/YY)	Strike Price	Number of Call Option Contracts	Expiration Date (M/D/YY)	Purchase/Acquisition Price Per Call Option Contract	Total Purchase/Acquisition Price (excluding taxes, commissions, and fees)	Insert an “E” if Exercised. Insert an “X” if Expired. Insert an “A” if Assigned.	Exercise Date (M/D/YY)
/ /	\$		/ /	\$	\$		/ /
/ /	\$		/ /	\$	\$		/ /
/ /	\$		/ /	\$	\$		/ /
/ /	\$		/ /	\$	\$		/ /

C. SALES OF HUMANIGEN CALL OPTIONS – Separately list each sale/disposition (including free deliveries) of Humanigen Call Option contracts from after the opening of trading on May 16, 2020, through and including the close of trading on July 13, 2022. (Must be documented.)

Date of Sale (M/D/YY)	Strike Price	Expiration Date	Number of Call Option Contracts	Sale Price Per Call Option Contract	Total Sale Price	Insert an “A” if Assigned. Insert an “X” if Expired.	Assignment Date (Month/Day/Year)
/ /	\$	/ /		\$	\$		/ /
/ /	\$	/ /		\$	\$		/ /
/ /	\$	/ /		\$	\$		/ /
/ /	\$	/ /		\$	\$		/ /

D. ENDING HOLDINGS – Separately list all positions in Humanigen Call Option contracts in which you had an open interest as of the close of trading on July 13, 2022. (Must be documented.)

Strike Price of Call Option Contract	Expiration Date of Call Option Contract (M/D/YY)	Number of Call Option Contracts in Which You Had an Open Interest
\$	/ /	
\$	/ /	
\$	/ /	
\$	/ /	

If you require additional space, attach extra schedules in the same format as above. Please attach extra schedules for option transactions that contain the information requested above in Section III. Sign and print your name on each additional page.

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

IV. SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS

1. I (We) submit this Proof of Claim and Release under the terms of the Stipulation of Settlement, dated as of September 22, 2023 (“Stipulation”), described in the Notice. I (We) also submit to the jurisdiction of the United States District Court for the District of New Jersey, with respect to my (our) claim as a Settlement Class Member (as defined in the Notice) and for purposes of enforcing the release set forth herein. I (We) further acknowledge that I am (we are) bound by and subject to the terms of any judgment that may be entered in the Litigation. I (We) agree to furnish additional information to Lead Counsel to support this claim if required to do so. I (We) have not submitted any other claim covering the same purchases or sales of Humanigen securities during the Class Period and know of no other Person having done so on my (our) behalf.

V. RELEASE

1. I (We) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever settle, release, relinquish, and discharge all of the Released Plaintiffs’ Claims.
2. “Released Plaintiffs’ Claims” means any and all claims and causes of action of every nature and description, whether known or Unknown Claims, asserted or unasserted, whether arising under federal, state, statutory, regulatory, common, or foreign law concerning, based on, arising out of, or in connection with : (i) the purchase or other acquisition or sale of Humanigen securities during the Class Period; (ii) the allegations, transactions, acts, facts, matters, occurrences, disclosures, statements, filings, representations, omissions, or events that were or could have been alleged or asserted in the Litigation; and (iii) disclosures, public filings, registration statements, press releases, presentations, or other statements made by Defendants during the Class Period.
3. “Unknown Claims” means any and all Released Claims which Plaintiffs, Plaintiffs’ Counsel, any Settlement Class Members, Defendants, or Defendants’ counsel do not know or suspect to exist in his, her, its, or their favor at the time of the release which, if known by him, her, it, or them, might have affected his, her, its, or their settlement with and release of the Settling Parties, or might have affected his, her, its, or their decision(s) with respect to the Settlement. Unknown Claims include those Released Claims in which some or all of the facts comprising the claim may be suspected, or that may be undisclosed or hidden. With respect to any and all Released Claims, the Settling Parties stipulate and agree that, upon the Effective Date, Plaintiffs and the Settlement Class Members shall be deemed to have, and by operation of the Judgment shall have, expressly waived and relinquished the provisions, rights, and benefits conferred by or under California Civil Code § 1542, or any other law of the United States or any state or territory of the United States, or principle of common law that is similar, comparable, or equivalent to § 1542, which provides:

A GENERAL RELEASE DOES NOT EXTEND TO CLAIMS THAT THE CREDITOR OR RELEASING PARTY DOES NOT KNOW OR SUSPECT TO EXIST IN HIS OR HER FAVOR AT THE TIME OF EXECUTING THE RELEASE AND THAT, IF KNOWN BY HIM OR HER, WOULD HAVE MATERIALLY AFFECTED HIS OR HER SETTLEMENT WITH THE DEBTOR OR RELEASED PARTY.

Plaintiffs acknowledge that they may hereafter discover facts in addition to or different from those which they or their counsel now knows or believes to be true with respect to the subject matter of the Released Claims, but the Plaintiffs shall expressly settle and release, and each Settlement Class Member, upon the Effective Date, shall be deemed to have, and by operation of the Judgment shall have, fully, finally, and forever settled and released any and all Released Claims, known or unknown, suspected or unsuspected, contingent or non-contingent, whether or not concealed or hidden, which

now exist, or heretofore have existed, upon any theory of law or equity now existing or coming into existence in the future, including, but not limited to, conduct which is negligent, reckless, intentional, with or without malice, or a breach of any duty, law, or rule, without regard to the subsequent discovery or existence of such different or additional facts. The Settling Parties acknowledge, and the Settlement Class Members shall be deemed by operation of the Judgment to have acknowledged, that the foregoing waiver was separately bargained for and is a key element of the Settlement of which this release is a part.

4. This release shall be of no force or effect unless and until the Court approves the Settlement set forth in the Stipulation and it becomes effective on the Effective Date.
5. I (We) hereby warrant and represent that I (we) have not assigned or transferred or purported to assign or transfer, voluntarily or involuntarily, any matter released pursuant to this release or any other part or portion thereof.
6. I (We) hereby warrant and represent that I (we) have included information about all of my (our) transactions in Humanigen securities that occurred during the Class Period as well as the number and type of Humanigen securities held by me (us) on May 15, 2020, and July 12, 2022.
7. I (We) certify that I am (we are) not subject to backup withholding under the provisions of Section 3406(a)(1)(C) of the Internal Revenue Code.

Note: If you have been notified by the Internal Revenue Service that you are subject to backup withholding, please strike out the language that you are not subject to backup withholding in the certification above.

I declare under penalty of perjury under the laws of the United States of America that the foregoing information supplied by the undersigned is true and correct.

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

Signature of Claimant

Signature of Joint Claimant, if any

Print Name of Claimant

Print Name of Joint Claimant, if any

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

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

Reminder Checklist:

1. Please sign the above release and declaration.
2. If this Claim is being made on behalf of Joint Claimants, then both must sign.
3. Remember to attach copies of supporting documentation, if available.
4. Do not send originals of certificates.
5. Keep a copy of your Claim Form and all supporting documentation for your records.
6. If you desire an acknowledgment of your Claim Form, send it Certified Mail, Return Receipt Requested.
7. If you move, please send your new address to the address below.
8. Do not use red pen or highlighter on the Claim Form or supporting documentation.

THIS PROOF OF CLAIM MUST BE MAILED NO LATER THAN MARCH 7, 2024.

HUMANIGEN, INC. SECURITIES LITIGATION

Claims Administrator

c/o A.B. Data, Ltd.

P.O. Box 173107

Milwaukee, WI 53217

(877-354-3785)

Online Submission: www.HumanigenSecuritiesLitigation.com

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 Settlement, 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 *In re Humanigen, Inc. Securities Litigation*.

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 *In re Humanigen, Inc. Securities Litigation*.

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 Settlement Class Period through the end of the Settlement 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.



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Appendix D
Sample Cover Letter

LETTERHEAD

Re: *Humanigen, Inc. Securities Litigation*

Date:

Enclosed is a fully executed master Proof of Claim and Release 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 Humanigen, Inc. Common Stock and Call Options, as well as all the opening positions and closing positions held for [ENTITY]'s proprietary accounts. Each transaction contains corresponding account information for which the claims are being filed.

The total number Humanigen, Inc. Securities purchased or acquired [##.##] for the amount of [\$0.0000] and Humanigen, Inc. Securities sold [##.##] for the amount of [\$0.0000]¹ 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).

¹ Please list all other transactions, if applicable, including free receipts and free deliveries.



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Appendix E

Electronic Claim Filing Template Mapping Instructions

Column	Field Name	Max Length	HUMANIGEN, INC. COMMON STOCK FIELD DESCRIPTION
A	Account Number	40	Account number associated with the proprietary account for which transactions are being submitted with this Proof of Claim and Release.
B	Account Name	40	Name of individual, company, or entity associated with the account listed in Column A.
C	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.
E	Beneficial Owner TIN Type (E/S/U/F)	1	E = Employer Identification Number (EIN); S = Social Security Number (SSN); U = Unknown; 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.
H	Street 1	40	Street Address 1
I	Street 2	40	Street Address 2
J	City	25	City
K	State	2	State
L	Zip Code	5	Zip code
M	Province	40	Province
N	Country	40	Country
O	CUSIP/ISIN	10	CUSIP number or ISIN for common stock.
P	Transaction Type/Holdings	2	O = Opening position - shares held at close of trading on May 15, 2020 P = Purchases made between May 16, 2020 through October 10, 2022, inclusive; FR = Free receipts made between May 16, 2020 through October 10, 2022, inclusive S = Sales made between May 16, 2020 through October 10, 2022, inclusive FD = Free deliveries made between May 16, 2020 through October 10, 2022, inclusive C = Closing position – shares held at close of trading on October 10, 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.
T	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 stock 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.



Appendix E

Electronic Claim Filing Template Mapping Instructions

Column	Field Name	Max Length	HUMANIGEN, INC. CALL OPTIONS FIELD DESCRIPTION
A	Account Number	40	Account number associated with the proprietary account for which transactions are being submitted with this Proof of Claim and Release.
B	Account Name	40	Name of individual, company, or entity associated with the account listed in Column A.
C	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.
E	Beneficial Owner TIN Type (E/S/U/F)	1	E = Employer Identification Number (EIN); S = Social Security Number (SSN); U = Unknown; F = Foreign.
F	Care of:	40	Name of the entity to which correspondence should be mailed.
G	Attn:	40	Name of the person to whose attention correspondence should be mailed.
H	Street 1	40	Street Address 1 for fund distribution
I	Street 2	40	Street Address 2 for fund distribution
J	City	25	City for fund distribution
K	State	2	State for fund distribution
L	Zip Code	5	Zip code for fund distribution
M	Province	40	Province for fund distribution
N	Country	40	Country for fund distribution
O	PUT/CALL	10	Type of option
P	Transaction Type/Holdings	2	O = Opening position - Call Options held as of the close of trading on May 15, 2020 P = Purchases made between May 16, 2020 through July 13, 2022 inclusive; FR = Free receipts made between May 16, 2020 through July 13, 2022, inclusive; S = Sales made between May 16, 2020 through July 13, 2022, inclusive; FD = Free deliveries made between May 16, 2020 through July 13, 2022, inclusive; C = Closing position – Call Options held at close of trading on July 13, 2022
Q	Trade Date	10	Trade date for transaction or holding date for opening and closing positions
R	Number of Options contracts	19	Number of contracts 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) of option, 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 opening positions or closing positions. Use zero when specifying free receipts and/or free deliveries.
T	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.
U	Expiration Month (MM/YYYY)	13	Expiration Date of Option Contract
V	Strike Price (\$xxx.xxxx)	19	Strike price.
W	Status (X/A/E)	1	Status of Option Contract. X = Expire, A = Assign, E = Exercise
X	Assignment/Exercise Date (MM/DD/YYYY)	13	Date of Option, Assignment, or Exercise

***All eligible Call Option Contracts for each contract for each account must balance. This means that the opening position plus total purchases, and free receipts during the Class Period MUST EQUAL the total sales and free deliveries during the Class 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.**