

The Pennsylvania Avenue Funds v. Inyx, Inc., et al., Class Action
c/o GCG
PO Box 9349
Dublin, Ohio 43017-4249
1-800-231-1815

INX



Must be Postmarked
No Later Than
June 8, 2012

CLAIMANT IDENTIFICATION:

Claim Number:

Control Number:

PROOF OF CLAIM

**THIS PROOF OF CLAIM MUST BE MAILED TO THE ADDRESS ABOVE
AND POSTMARKED NO LATER THAN JUNE 8, 2012.**

Please print clearly in black ink.

To recover as a member of the Class based on your claims in the action entitled The Pennsylvania Avenue Funds v. Inyx, Inc., et al., No. 08-cv-06857-PKC (the "Action"), in the United States District Court for the Southern District of New York, you must complete and, under Section E below, sign this Proof of Claim and Release form ("Proof of Claim"). If you fail to submit a timely, properly completed and addressed Proof of Claim, your claim may be rejected and you may be precluded from any recovery from the Net Settlement Fund. All defined terms contained herein shall have the same meanings as set forth in the Stipulation and Agreement of Settlement dated as of June 8, 2012.

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Questions? Call 1-800-231-1815 or visit www.gcginc.com



SECTION A - CLAIMANT INFORMATION

LAST NAME (CLAIMANT)

FIRST NAME (CLAIMANT)

Last Name (Beneficial Owner if Different From Claimant)

First Name (Beneficial Owner)

Last Name (Co-Beneficial Owner)

First Name (Co-Beneficial Owner)

Company/Other Entity (If Claimant Is Not an Individual)

Contact Person (If Claimant is Not an Individual)

Trustee/Nominee/Other

Account Number (If Claimant Is Not an Individual)

Trust/Other Date (If Applicable)

Address Line 1

Address Line 2 (If Applicable)

City

State

Zip Code

Foreign Province

Postal Code

Foreign Country

Telephone Number (Day)

Telephone Number (Night)

Last Four Digits of Beneficial Owner's Employer Identification Number or Social Security Number

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.)*

IF YOU FAIL TO SUBMIT A COMPLETE CLAIM BY JUNE 8, 2012 YOUR CLAIM IS SUBJECT TO REJECTION OR YOUR PAYMENT MAY BE DELAYED.

NOTICE REGARDING ELECTRONIC FILES: Certain claimants with large numbers of transactions may request to, or may be requested to, submit information regarding their transactions in electronic files. To obtain the mandatory electronic filing requirements and file layout, you may visit the website at www.gcginc.com or you may e-mail the Claims Administrator at eClaim@gcginc.com. Any file not in accordance 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 an email after processing your file with your claim numbers and respective account information. Do not assume that your file has been received or processed until you receive this email. If you do not receive such an email within 10 days of your submission, you should contact the electronic filing department at eClaim@gcginc.com to inquire about your file and confirm it was received and acceptable.



SECTION C – SUPPORTING DOCUMENTATION

Please Submit Supporting Documentation For Your Claim. You must submit documentation for your trading history. Acceptable documentation may include: (a) monthly stock brokerage or other investment account statements; (b) trade confirmation slips; (c) a signed letter from your broker on firm letterhead verifying the information you are providing; (d) a Deposit or Escrow Receipt showing your holdings; or (e) other equivalent proof of your transactions. DO NOT SEND ORIGINALS. If you have questions, please call 1-800-231-1815.

SECTION D – RELEASE

Please Review the Release For the Claims Against the Defendants and Sign Below.

1. I (We) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally and forever release, relinquish and discharge, all of the Released Claims against Inyx, Inc. ("Inyx"), Jack Kachkar, Rima Goldshmidt, and Jay M. Green (collectively, "Defendants") and each and all "Released Parties," defined as each and all of Defendants, and all of their respective past or present employees, independent contractors, officers, directors, subsidiaries, parents, successors and predecessors, agents, attorneys, advisors, insurers, investment advisors, auditors, accountants, all members of their immediate families, all trusts which are for the benefit of any of them and/or member(s) of their family, the legal representatives, heirs or successors in interest of all of the foregoing, and any person, firm, trust, corporation, officer, director or other individual or entity in which any one of them has a controlling interest or which is related to or affiliated with any of the foregoing.
2. "Released Claims" shall collectively mean any and all claims, whether based on federal, state, local, statutory or common law or any other law, rule or regulation, class or individual in nature, that have been asserted at any time against any of the Released Parties by any Class Member, in any capacity, in this Action or in any court of competent jurisdiction or other tribunal or adjudicative body, which arise out of or relate to: (a) purchases of Inyx common stock during the Class Period; (b) the allegations set forth in the Amended Complaint; (c) any alleged misrepresentation or omission occurring during the Class Period concerning or relating to the financial condition, results of operations, financial statements, press releases, public filings, or any public disclosures by Inyx or any of the Released Parties relating in any way to Inyx; or (d) the conduct of the business of Inyx by any of the Released Parties or Inyx with regard to any of the allegations, transactions, facts, matters, occurrences, representations or omissions, set forth or referred to in the Amended Complaint.
3. 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.
4. I (We) hereby warrant and represent to the best of my (our) knowledge that I (we) have included information about all of my (our) transactions in Inyx common stock that occurred during the Class Period as well as the number of shares of Inyx common stock held by me (us) at the close of trading on March 31, 2005 and July 1, 2007.

SECTION E – CERTIFICATION

Under the penalty of perjury, I (we) certify that:

1. The number shown below on this form is my (our) current SSN/TIN; and
2. I (We) certify that I am (we are) not subjected 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.

The Internal Revenue Service does not require your consent to any provision other than the certification required to avoid backup withholding.



SECTION E – CERTIFICATION (CONTINUED)

I (We) 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 _____, 20____ in _____.
(month) (year) (city) (state)

Signature of Claimant

Print Name of Claimant

Date

Signature of Joint Claimant, if any

Print Name of Joint Claimant, if any

Date

If Claimant is other than an individual, or is not the person completing this form, the following also must be provided:

Signature of Person Completing Form

Print Name of Person Completing Form

Date

Capacity of person signing on behalf of Claimant, if other than an individual, e.g., executor, president, custodian, etc.

**CHECKLIST REGARDING PROOF OF CLAIM FORM**

1. Please sign the release and certification in Section E. If this Claim Form is being made on behalf of joint Claimants, then both must sign.
2. Remember to attach only copies of acceptable supporting documentation.
3. Please do not highlight any portion of the Claim Form or any supporting documents.
4. Do not send original stock certificates or documentation. These items cannot be returned to you by the Claims Administrator.
5. Keep copies of the completed Claim Form and documentation for your own records.
6. 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 1-800-231-1815.
7. If your address changes in the future, or if this Claim Form was sent to an old or incorrect address, please send the Claims Administrator written notification of your new address. If you change your name, please inform the Claims Administrator.
8. If you have any questions or concerns regarding your claim, please contact the Claims Administrator at the above address or at 1-800-231-1815, or visit www.gcginc.com.

THIS CLAIM FORM MUST BE MAILED TO THE CLAIMS ADMINISTRATOR BY FIRST-CLASS MAIL, POSTAGE PREPAID, **POSTMARKED NO LATER THAN JUNE 8, 2012**, ADDRESSED AS FOLLOWS:

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