

Must be Postmarked
No Later Than
June 30, 2008

In re Transkaryotic Therapies Securities Litigation Settlement
c/o The Garden City Group, Inc.
Claims Administrator
P.O. Box 9225
Dublin, OH 43017-4625
1-800-918-4311



PROOF OF CLAIM AND RELEASE

PART I: CLAIMANT IDENTIFICATION:

Claim Number:

Control Number:

**WRITE ANY NAME AND ADDRESS CORRECTIONS
BELOW OR IF THERE IS NO PREPRINTED DATA TO
THE LEFT, YOU MUST PROVIDE YOUR FULL NAME
AND ADDRESS HERE:**

Name:

Address:

City:

State/Country:

Zip Code:

**IF THE ABOVE AREA IS BLANK, YOU MUST ENTER
YOUR FULL NAME AND ADDRESS HERE** →

You must fill in the last four digits of your Social Security
Number/Taxpayer ID Number if box is blank:

Daytime Telephone Number: () -

Evening Telephone Number: () -

Email Address:

Check appropriate box:

- | | |
|---------------------------------------|--|
| ☐ Individual | ☐ Corporation |
| ☐ Joint Owners | ☐ IRA |
| ☐ Estate | ☐ Other _____ (Specify) |

I. GENERAL INSTRUCTIONS

A. To recover as a member of the Class based on your claims in the action entitled In re Transkaryotic Therapies, Inc. Sec. Litig., Civil Action No. 03-10165-RWZ (the "Action"), you must complete this Proof of Claim and Release form ("Proof of Claim"). If you fail to submit a Proof of Claim by the deadline, your claim may be rejected and you may be precluded from any recovery from the Net Settlement Fund created in connection with the proposed Settlement of the Action.

B. Submission of this Proof of Claim, however, does not assure that you will share in the proceeds of the Settlement Fund created in this Action.

C. **YOU MUST COMPLETE AND SUBMIT YOUR PROOF OF CLAIM VIA MAIL POSTMARKED ON OR BEFORE JUNE 30, 2008, ADDRESSED TO THE CLAIMS ADMINISTRATOR AS FOLLOWS:**

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If you are NOT a member of the Class, as defined in the Notice of Pendency and Proposed Settlement of Class Action and Motion for Attorneys' Fees and Settlement Hearing (the "Notice"), DO NOT submit a Proof of Claim.

D. If you are a member of the Class, you are bound by the terms of any judgment entered in the Action, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM FORM.

QUESTIONS? VISIT WWW.TRANSKARYOTICCLASSSETTLEMENT.COM OR CALL 1-800-918-4311



II. INSTRUCTIONS FOR CLAIMANT IDENTIFICATION SCHEDULE

A. If you purchased or otherwise acquired the common stock of Transkaryotic Therapies, Inc. ("TKT" or the "Company"), during the period from January 4, 2001 through January 10, 2003, inclusive and held the share(s) in your name, you are the beneficial purchaser as well as the record purchaser. If, however, the share(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 the record purchaser.

B. Use Part I of this form entitled "Claimant Identification" to identify the beneficial owner of shares of TKT common stock which form the basis of this claim. **THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL OWNER(S), OR THE LEGAL REPRESENTATIVE OF SUCH OWNER(S) OF THE SHARES OF TKT COMMON STOCK UPON WHICH THIS CLAIM IS BASED.**

C. All joint purchasers must sign this claim. Executors, administrators, guardians, conservators and trustees must complete and sign this claim on behalf of persons or entities represented by them and proof of their authority must accompany this claim and their titles or capacities must be stated. The last four digits of 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. INSTRUCTIONS FOR SCHEDULE OF TRANSACTIONS

A. In the space provided below, supply all required details of your transaction(s) in TKT common stock. If you need more space, attach separate sheets giving all of the required information. Sign and print or type your name on each additional sheet.

B. Please provide all of the requested information with respect to **all** of your purchases and acquisitions of TKT common stock during the period January 4, 2001 through January 10, 2003, inclusive, and sales during the period from January 4, 2001 through April 14, 2003, inclusive, whether such transactions resulted in a profit or a loss. Failure to report all such transaction may result in the rejection of your claim.

C. 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.

D. Broker confirmations or other documentation of your transactions in TKT common stock should be attached to your claim. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.

E. The requests are designed to provide the minimum amount of information necessary to process the most simple claims. The Claims Administrator may request additional information as required to efficiently and reliably calculate your losses. In some cases where the Claims Administrator cannot perform the calculation accurately or at a reasonable cost to the Class with the information provided, the Claims Administrator may condition acceptance of the claim upon the production of additional information, including, where applicable, information concerning transactions in any derivatives of the subject securities such as options, and/or the hiring of an accounting expert at the Claimant's cost.

F. **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. All Claimants **MUST** submit a manually signed paper Proof of Claim form listing all their transactions whether or not they also submit electronic copies. If you wish to file your claim electronically, you must contact the Claims Administrator at 1-800-918-4311 or visit their website at www.gardencitygroup.com to obtain the required file layout. 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.


PART II: SCHEDULE OF TRANSACTIONS IN TKT COMMON STOCK

Separately list each of your purchases/acquisitions or sales of TKT common stock below. Photocopy this page if more space is needed. **Be sure to include your name and the last four digits of your Social Security number or Tax ID number on any additional sheets.** The date of purchase, acquisition or sale is the "trade" or "contract" date, and not the "settlement" or "payment" date.

1. **BEGINNING HOLDINGS:** Number of shares of TKT common stock held at the close of business on **January 3, 2001**. (If none, write 0), (If other than zero, must be documented):
2. **PURCHASES/ACQUISITIONS:** Please list all purchases of TKT common stock during the period of **January 4, 2001** through and including **January 10, 2003**. (must be documented):

Date(s) of Purchase/Acquisition (List Chronologically) (Month/Day/Year)	Number of Shares Purchased/Acquired	Purchase/Acquisition Price Per Share	Total Purchase Price (including commissions, taxes, or other fees)
/ /		\$	\$
/ /		\$	\$
/ /		\$	\$
/ /		\$	\$

3. **PURCHASES/ACQUISITIONS:** Number of shares of TKT common stock Purchased/Acquired between **January 11, 2003** and **April 14, 2003**, inclusive. (If none, write 0):
4. **SALES:** Please list all sales of TKT common stock during the period **January 4, 2001** through **April 14, 2003**, inclusive. (must be documented):

Sale Date(s) (List Chronologically) (Month/Day/Year)	Number of Shares of Common Stock Sold	Sale Price Per Share	Total Sale Price (after commissions, transfer taxes, or other fees)
/ /		\$	\$
/ /		\$	\$
/ /		\$	\$
/ /		\$	\$

5. **UNSOLD HOLDINGS:** Number of shares of TKT common stock held at the close of business on **April 14, 2003**. (If none, write 0), (If other than zero, must be documented):

IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS YOU MUST PHOTOCOPY THIS PAGE AND CHECK THIS BOX ☐
IF YOU DO NOT CHECK THIS BOX THESE ADDITIONAL PAGES WILL NOT BE REVIEWED



YOU MUST READ AND SIGN THE RELEASE ON PAGE 5. FAILURE TO SIGN THE RELEASE MAY RESULT IN A DELAY IN PROCESSING OR THE REJECTION OF YOUR CLAIM.

If you require additional space, attach extra schedules in the same format as above. Copies of broker's confirmations or other documentation evidencing your transactions in TKT common stock should be attached.

PART III: SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGEMENTS

1. I (We) submit this Proof of Claim and Release under the terms of the Stipulation and Agreement of Settlement described in the Notice. I (We) also submit to the jurisdiction of the United States District Court, District of Massachusetts with respect to my claim as a Class Member and for purposes of enforcing the release set forth herein and any Judgment which may be entered in the Action. I (We) further acknowledge that I (we) am (are) bound by and subject to the terms of any Judgment that may be entered in the Action.

2. I (We) agree to furnish additional information to the Claims Administrator to support this claim if required to do so.

PART IV: DEFINITIONS AND RELEASE

1. I (We) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally and forever settle, discharge and release all "Settled Claims" against all "Released Parties," as defined below.

2. "Released Parties" means Defendants, their successors, past or present subsidiaries, parents, principals, affiliates, general or limited partners or partnerships, successors and predecessors, heirs, assigns, officers, directors, agents, employees, attorneys, advisors, insurers, co-insurers, re-insurers, consultants, administrators, estates, executors, trustees, personal representatives, immediate family members and any person, firm, trust, partnership, corporation, officer, director or other individual or entity in which either Defendant has a controlling interest or which is related to or affiliated with either Defendant, and the legal representatives, heirs, executors, administrators, trustees, successors in interest, or assigns.

3. "Settled Claims" means any and all claims, debts, demands, rights or causes of action, suits, matters, and issues or liabilities whatsoever (including, but not limited to, any claims for damages, interest, attorneys' fees, expert or consulting fees, and any other costs, expenses or liability whatsoever), whether based on federal, state, local, statutory or common law or any other law, rule or regulation, whether fixed or contingent, accrued or unaccrued, liquidated or unliquidated, at law or in equity, matured or unmatured, whether class or individual in nature, including both known claims and Unknown Claims (as defined herein), (i) that have been asserted in the Action against any of the Released Parties, or (ii) that could have been asserted in any forum by the Class Members or any of them or the successors and assigns of any of them against any of the Released Parties which arise out of, are based upon, or relate to the allegations, transactions, facts, matters or occurrences, representations or omissions involved, set forth, or referred to in the Action and related to the purchase or acquisition of TKT common stock during the Class Period.

4. This release shall be of no force or effect unless and until the Court gives final approval to the Settlement and the Effective Date occurs.

PART V: REPRESENTATIONS

1. 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.

2. I (We) hereby warrant and represent that I (we) have included information about all of my (our) purchases, acquisitions and sales transaction in TKT common stock which occurred during the Class Period and the number of shares of TKT common stock held by me (us) at the close of trading on January 3, 2001 and the close of trading on April 14, 2003.



I declare under penalty of perjury under the laws of the State of Massachusetts and the United States of America that the foregoing information supplied by the undersigned is true and correct and that this Proof of Claim and Release form was executed this _____ day of _____ in _____.

(month, year) (City, State, Country)

(Sign your name here)

(Type or print your name here)

(Joint owner sign your name here)

(Joint owner type or print your name here)

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



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

1. Please sign the Certification Section of the Proof of Claim and Release form.
2. If this claim is made on behalf of joint claimants, then both must sign.
3. Please remember to attach supporting documents.
4. **DO NOT SEND ORIGINALS OF ANY SUPPORTING DOCUMENTS.**
5. Keep a copy of your Proof of Claim and Release form and all documentation submitted for your records.
6. The Claims Administrator will acknowledge receipt of your Proof of Claim and Release by mail, within 30 days. Your claim is not deemed filed until you receive an acknowledgment postcard. If you do not receive an acknowledgment postcard within 30 days, please call the Claims Administrator toll free at 1-800-918-4311.
7. If you move, please send us your new address.
8. **Do not use highlighter on the Proof of Claim and Release form or supporting documentation.**

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