

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

CITY OF WARWICK RETIREMENT SYSTEM,
Individually and on behalf of all others similarly
situated,

Plaintiff,

v.

CATALENT, INC., JOHN CHIMINSKI,
ALESSANDRO MASELLI, and THOMAS
CASTELLANO,

Defendants.

Case No: 3:23-cv-01108-ZNQ-JTQ

Hon. Zahid N. Quraishi, U.S.D.J.

PROOF OF CLAIM AND RELEASE FORM

I. GENERAL INSTRUCTIONS

1. As a member of the Settlement Class based on your claims in the class action entitled *City of Warwick Retirement System v. Catalent, Inc. et al.*, Case No. 3:23-cv-01108-ZNQ-JTQ (D.N.J.) (the “Action”), you must complete and, on page 10 below, sign this Proof of Claim and Release form (“Claim Form”). If you fail to submit a timely and properly addressed (as explained in paragraph 2 below) Claim Form, your claim may be rejected and you may not receive any recovery from the Net Settlement Fund created in connection with the proposed Settlement of the Action. Submission of this Claim Form, however, does not assure that you will share in the proceeds of the Settlement.¹

2. THIS CLAIM FORM MUST BE SUBMITTED ONLINE AT WWW.CATALENTSECURITIESSETTLEMENT.COM NO LATER THAN MAY 26, 2026 OR, IF MAILED, BE POSTMARKED NO LATER THAN MAY 26, 2026, ADDRESSED AS FOLLOWS:

Catalent Securities Settlement
PO Box 2683
Portland, OR 97208-2683

3. If you are a member of the Settlement Class and you have not requested exclusion from the Settlement Class, you will be bound by and subject to the terms of all judgments and orders entered in the Action, including the releases provided therein, **WHETHER OR NOT YOU SUBMIT A CLAIM FORM OR RECEIVE A PAYMENT.**

II. CLAIMANT IDENTIFICATION

1. If you purchased or otherwise acquired the publicly traded common stock and/or exchange-traded call options, or sold the exchange-traded put options, of Catalent, Inc. during the period from August 30, 2021 through May 7, 2023, both dates inclusive (the “Class Period”), and held the securities in your name, you are the beneficial and record owner of the securities. If, however, the Catalent securities were purchased or acquired through a third party, such as a brokerage firm, you are the beneficial owner and the third party is the record owner.

2. Use **Part I** of this form entitled “Claimant Identification” to identify each beneficial owner of Catalent publicly traded common stock or exchange-traded options that forms the basis of this claim, as well as the owner of record if different. **THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL OWNERS OR THE LEGAL REPRESENTATIVE OF SUCH OWNERS.**

3. All joint owners must sign this Claim Form. Executors, administrators, guardians, conservators, legal representatives, and trustees filing this claim must complete and sign this Claim Form on behalf of persons represented by them and 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. IDENTIFICATION OF TRANSACTIONS

1. Use **Parts II through IV** of this form to supply all required details of your transaction(s) in Catalent publicly traded common stock, exchange-traded call options, and exchange-traded put options during the relevant time periods. 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 the purchases, acquisitions, and sales of Catalent common stock and options, whether the transactions resulted in a profit or a loss. Failure to report all such transactions may result in the rejection of your claim.

3. The date of covering a “short sale” is deemed to be the date of purchase or acquisition of Catalent common stock. The date of a “short sale” is deemed to be the date of sale.

4. Claims must be accompanied by adequate supporting documentation for the transactions reported in the form of broker confirmation slips, broker account statements, an authorized statement from the broker containing the transactional information found in a broker confirmation slip, or such other documentation as is deemed adequate by the Claims Administrator and/or Co-Lead Counsel. Self-generated emails or spreadsheets are not sufficient.

¹ All capitalized terms not defined in this Claim Form have the meanings given in the Stipulation and Agreement of Settlement, dated as of December 22, 2025 (the “Stipulation”), available at www.CatalentSecuritiesSettlement.com.

Failure to provide sufficient documentation could delay verification of your claim or result in rejection of your claim. Claimants bear the burden of establishing their right to a recovery from the Net Settlement Fund. **THE PARTIES DO NOT HAVE INFORMATION ABOUT YOUR TRANSACTIONS IN CATALENT SECURITIES.**

5. NOTICE REGARDING ELECTRONIC FILES: Certain Claimants with large numbers of transactions may request, or may be asked, to submit information regarding their transactions in electronic files. (This is different than the online claim portal on the Settlement website.) All such Claimants **MUST** submit a manually signed paper Claim Form whether or not they also submit electronic copies. If you wish to submit your claim electronically, you must contact the Claims Administrator at (877) 239-4873 to obtain the required file layout or visit www.CatalentSecuritiesSettlement.com. 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.

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 First Name	MI	Beneficial Owner's Last Name
Co-Beneficial Owner's First Name	MI	Co-Beneficial Owner's Last Name
Entity Name (if Beneficial Owner is not an individual)		
Representative or Custodian Name (if different from Beneficial Owner[s] listed above)		
Address 1 (street name and number)		
Address 2 (apartment, unit or box number)		
City	State	ZIP Code
		-
Country		
Last four digits of Social Security Number or Taxpayer Identification Number		
Telephone Number (Day)	Telephone Number (Evening)	
- -	- -	
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.)		
Account Number (where securities were traded)		
Claimant Account Type (check appropriate box)		
☐ Individual	☐ IRA/401K	☐ Estate
☐ Joint	☐ Pension Plan	☐ Trust
☐ Corporation	☐ Other _____ (please specify)	

PART II: SCHEDULE OF TRANSACTIONS IN CATALENT PUBLICLY TRADED COMMON STOCK

- A. Number of shares of Catalent publicly traded common stock held at the opening of trading on August 30, 2021. If none, write 0. Must submit documentation.

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- B. Purchases or acquisitions of Catalent publicly traded common stock from August 30, 2021 through August 4, 2023, inclusive. Must submit documentation.²

Date of Purchase/Acquisition (List Chronologically)	Number of Shares Purchased/Acquired	Purchase/Acquisition Price per Share	Total Purchase/Acquisition Price (Excluding Commissions, Taxes, and Fees)																												
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- C. Sales of Catalent publicly traded common stock from August 30, 2021 through August 4, 2023, inclusive. Must submit documentation.

Sale Date (List Chronologically) (Month/Day/Year)	Number of Shares Sold	Sale Price per Share	Total Sale Price (Excluding Commissions, Taxes, and Fees)																												
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- D. Number of shares of Catalent publicly traded common stock held at the close of trading on August 4, 2023. Must submit documentation.

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² Information requested in this Claim Form with respect to purchases/acquisitions from May 8, 2023 through August 4, 2023 is needed only in order for the Claims Administrator to confirm that you have reported all relevant transactions. Purchases/acquisitions during this period, however, are not eligible for a recovery because they are outside the Class Period and will not be used for purposes of calculating Recognized Loss Amounts pursuant to the Plan of Allocation.

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- C. Separately list each and every sale/disposition (including free deliveries) of Catalent Call Option contracts during the period from August 30, 2021 through May 7, 2023, inclusive, and provide the following information. Must submit documentation.

Date of Sale (List Chronologically) (Month/Day/Year)	Strike Price of Call Option Contract	Expiration Date of Call Option Contract (Month/Day/Year)	Number of Call Option Contracts Sold	Sale Price Per Contract
	•			•
	•			•
	•			•
	•			•

- D. Separately list all positions in Catalent Call Option contracts in which you had an open interest as of the close of trading on May 7, 2023, long or short. Must submit documentation.

Strike Price of Call Option Contract	Expiration Date of Call Option Contract (Month/Day/Year)	Number of Call Option Contracts in Which You Had an Open Interest
•		
•		
•		
•		

PART IV: SCHEDULE OF TRANSACTIONS IN CATALENT PUT OPTION CONTRACTS

- A. Separately list all positions in Catalent Put Option contracts in which you had an open interest as of the opening of trading on August 30, 2021, long or short (must be documented):

Strike Price of Put Option Contract	Expiration Date of Put Option Contract (Month/Day/Year)	Number of Put Option Contracts in Which You Had an Open Interest (including any long holdings)
•		
•		
•		
•		

B. Separately list each and every sale (writing) (including free deliveries) of Catalent Put Option contracts during the period from August 30, 2021 through May 7, 2023, inclusive, and provide the following information. Must submit documentation.

Date of Writing/Sale (List Chronologically) (Month/Day/Year)	Strike Price of Put Option Contract	Expiration Date of Put Option Contract (Month/Day/Year)	Number of Put Option Contracts Sold (Written)	[X]Expired [A]Assigned	Sale Price Per Contract	Exercise Date (Month/Day/Year)

C. Separately list each and every purchase/acquisition (including free receipts) of Catalent Put Option contracts during the period from August 30, 2021 through May 7, 2023, inclusive, and provide the following information. Must submit documentation.

Date of Purchase/Acquisition (List Chronologically) (Month/Day/Year)	Strike Price of Put Option Contract	Expiration Date for Put Option Contract (Month/Day/Year)	Number of Put Option Contracts Purchased/Acquired	Purchase Price Per Contract

- D. Separately list all positions in Catalent Put Option contracts in which you had an open interest at the close of trading on May 7, 2023. Must submit documentation.

Strike Price of Put Option Contract	Expiration Date of Put Option Contract (Month/Day/Year)	Number of Put Option Contracts in Which You Had an Open Interest
•		
•		
•		
•		

V. SUBMISSION TO JURISDICTION OF THE COURT AND ACKNOWLEDGMENTS

By signing and submitting this Claim Form, the Claimant(s) or the person(s) acting on behalf of the Claimant(s) certify(ies) that: I (We) submit this Claim Form under the terms of the Plan of Allocation described in the Notice. I (We) 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(s) and for purposes of enforcing the releases set forth herein. I (We) further acknowledge that, once the Settlement reaches its Effective Date, I (we) will be bound by and subject to the terms of all judgments and orders entered in the Action, including the releases set forth therein. I (We) agree to furnish additional information to the Claims Administrator to support this claim, such as additional documentation for transactions in Catalent publicly traded common stock, exchange-traded options, and other Catalent securities, if required to do so. I (We) have not submitted any other claim covering the same transactions in Catalent Securities during the time periods herein and know of no other person having done so on my (our) behalf.

VI. RELEASES, WARRANTIES, AND CERTIFICATION

1. I (We) hereby warrant and represent that I am (we are) a Settlement Class Member as defined in the notices, and that I am (we are) not excluded from the Settlement Class.
2. I (We) hereby acknowledge full and complete satisfaction of, and do hereby fully, finally, and forever compromise, settle, release, resolve, relinquish, waive, and discharge with prejudice the Released Plaintiffs' Claims as to each and all of the Released Defendant Parties (as these terms are defined in the Notice). This release shall be of no force or effect unless and until the Court approves the Settlement and it becomes effective on the Effective Date.
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 that I (we) have included information about all purchases, acquisitions, and sales of Catalent publicly traded common stock and exchange-traded options that occurred during the relevant time periods and the number of securities held by me (us), to the extent requested.
5. I (We) certify that I am (we are) NOT subject to backup tax withholding. (If you have been notified by the Internal Revenue Service that you are subject to backup withholding, please strike out the prior sentence.)

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

Executed this day of , 20 .

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)

REMINDER CHECKLIST:

1. Sign this Claim Form.
2. DO NOT HIGHLIGHT THE CLAIM FORM OR YOUR SUPPORTING DOCUMENTATION.
3. Attach only copies of supporting documentation as these documents will not be returned to you.
4. Keep a copy of your Claim Form for your records.
5. The Claims Administrator will acknowledge receipt of your Claim Form by mail, within 60 days. **Your claim is not deemed submitted until you receive an acknowledgment postcard.** If you do not receive an acknowledgment postcard within 60 days, please call the Claims Administrator toll free at (877) 239-4873 or email info@CatalentSecuritiesSettlement.com.
6. If you move after submitting this Claim Form, please notify the Claims Administrator of the change in your address, otherwise you may not receive additional notices or payment.