UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF NEW YORK
SEC v. DANSKE BANK A/S
CIVIL ACTION NUMBER: 7:22-cv-10509

DANSKE BANK FAIR FUND
CLAIM FORM

This Claim Form must be POSTMARKED on or BEFORE APRIL 9, 2027

Claim Forms may be submitted online by visiting the Danske Bank Fair Fund website: danskebankfairfund.com. If you wish to complete and mail a paper Claim Form, please review the instructions in the Reminder Checklist below. For assistance in completing the Claim Form, please contact our customer service department at (833) 697-5040 or visit the Danske Bank Fair Fund website.

INFORMATION ABOUT THE CLAIMANT

1. Beneficial Owner Information:

Name of Beneficial Owner: _____
First, Middle, Last or Entity Name (if the Beneficial Owner is a corporation, trust, estate, etc.)

Name of Joint Beneficial Owner, if any: _____
First, Middle, Last

If shares held in an IRA, name of **CURRENT** custodian: _____ IRA Account # _____

2. Contact Information:

Attention: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Foreign Province: _____ Foreign Postal Code: _____

Country: _____

Daytime Phone Number: _____ Evening Phone Number: _____

E-Mail Address: _____ Joint/Alternate Email: _____

3. Enter Personal ID Number(s) and check ID type in the appropriate boxes below.

SSN: ☐ Joint SSN: ☐ EIN: ☐

If you are not a U.S. citizen, please include a copy of your passport or other identification.

Country: ☐ ID Type: ☐ ID #: ☐

Claimant Account Type (check appropriate box below):

Account Type: ☐ Individual / IRA ☐ Partnership ☐ Estate ☐ Trust ☐ LLC
☐ Joint Owners ☐ Corporation ☐ UGMA ☐ Other: _____

If you have investments through more than one Account Type, you must complete a separate Claim Form for each Account Type.

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INFORMATION FOR TRANSACTIONS IN DANSKE AMERICAN DEPOSITORY RECEIPTS (ADR)
TICKER: DNKEY ISIN: US2363632066

4. HOLDINGS ON JANUARY 1, 2009: _____

Enter the Total Number of Danske Bank ADRs held as of the opening of trading on January 1, 2009. If none, write "0" or "Zero."

5. PURCHASES FROM JANUARY 1, 2009, THROUGH AND INCLUDING DECEMBER 17, 2018:

List separately and in chronological order each purchase and/or acquisition of Danske Bank ADRs made between January 1, 2009, and December 17, 2018, both dates inclusive. Please note that transactions in Danske Bank ADRs that are pursuant to, or in connection with a swap, an option, or other derivative instrument are not eligible.

Date(s) of Purchase (Trade Date) MM/DD/YYYY	**Transaction Type** Purchase or Transfer (Received)	**Number of ADRs** Purchased or Transferred (Received)	**Total Purchase Price**	**Cover a Short Position?** Y / N	**Option Exercised or Assigned?*** Y / N

6. SALES FROM JANUARY 1, 2009, THROUGH AND INCLUDING DECEMBER 17, 2018:

List separately and in chronological order each sale and/or delivered transfer of Danske Bank ADRs made between January 1, 2009, and December 17, 2018, both dates inclusive. Please note that transactions in Danske Bank ADRs that are pursuant to, or in connection with a swap, an option, or other derivative instrument are not eligible.

Date(s) of Sale (Trade Date) MM/DD/YYYY	**Transaction Type** Sale or Transfer (Delivered)	**Number of ADRs** Sold or Transferred (Delivered)	**Total Sale Price**	**Short Sale?** Y / N	**Option Exercised or Assigned?*** Y / N

**Options contracts to purchase or sell Danske Bank ADRs are not eligible securities under the Distribution Plan. However, when an option is exercised or assigned, the resulting purchase or sale of Danske Bank ADRs may be treated as an eligible transaction. For a call option, the purchase date is the exercise date and the purchase price is the call's strike price. For a put option, the sale date is the assignment date and the sale price is the put's strike price.*

7. ENDING HOLDING ON SEPTEMBER 18, 2018: _____

8. ENDING HOLDING ON DECEMBER 17, 2018: _____

Enter the Total Number of Danske Bank ADRs held at the end of the day as of September 18, 2018, and December 17, 2018. If none, write "0" or "Zero."

YOUR FULL SEPTEMBER 2018 and FULL DECEMBER 2018 BROKERAGE STATEMENTS SHOWING ALL ACTIVITY AND HOLDING POSITIONS MUST BE INCLUDED WITH YOUR CLAIM FORM.

If you require additional space, please make copies of this schedule. Sign and print your name on each additional page.

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INFORMATION FOR TRANSACTIONS IN DANSKE COMMON SHARES
ISIN: DK0010274414

9. HOLDINGS ON JANUARY 1, 2009: _____

Enter the Total Number of Shares of Danske Bank Common Shares held as of the opening of trading on January 1, 2009. If none, write "0" or "Zero."

10. PURCHASES FROM JANUARY 1, 2009, THROUGH AND INCLUDING DECEMBER 17, 2018:

List separately and in chronological order each purchase and/or acquisition of Danske Bank Common Shares made between January 1, 2009, and December 17, 2018, both dates inclusive. Please note that transactions that are pursuant to, or in connection with a swap, an option, or other derivative instrument are not eligible.

Date(s) of Purchase (Trade Date) MM/DD/YYYY	**Transaction Type** Purchase or Transfer (Received)	**Number of Shares** Purchased or Transferred (Received)	**Total Purchase Price**	**Cover a Short Position?** Y / N	**Option Exercised or Assigned?*** Y / N

11. SALES FROM JANUARY 1, 2009, THROUGH AND INCLUDING DECEMBER 17, 2018:

List separately and in chronological order each sale and/or delivered transfer of Danske Bank Common Shares made between January 1, 2009, and December 17, 2018, both dates inclusive. Please note that transactions that are pursuant to, or in connection with a swap, an option, or other derivative instrument are not eligible.

Date(s) of Sale (Trade Date) MM/DD/YYYY	**Transaction Type** Sale or Transfer (Delivered)	**Number of Shares** Sold or Transferred (Delivered)	**Total Sale Price**	**Short Sale?** Y / N	**Option Exercised or Assigned?*** Y / N

**Options contracts to purchase or sell Danske Bank Common Shares are not eligible securities under the Distribution Plan. However, when an option is exercised or assigned, the resulting purchase or sale of Danske Bank Common Shares may be treated as an eligible transaction. For a call option, the purchase date is the exercise date and the purchase price is the call's strike price. For a put option, the sale date is the assignment date and the sale price is the put's strike price.*

12. ENDING HOLDING ON SEPTEMBER 18, 2018: _____

13. ENDING HOLDING ON DECEMBER 17, 2018: _____

Enter Total Number of Danske Common Shares held at the end of the day as of September 18, 2018, and December 17, 2018. If none, write "0" or "Zero."

YOUR FULL SEPTEMBER 2018 and FULL DECEMBER 2018 BROKERAGE STATEMENTS SHOWING ALL ACTIVITY AND HOLDING POSITIONS MUST BE INCLUDED WITH YOUR CLAIM FORM.

If you require additional space, please make copies of this schedule. Sign and print your name on each additional page.

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CERTIFICATION AND RELEASE

Each of the undersigned represents and certifies UNDER PENALTY OF PERJURY that such person or entity:

1. Has provided accurate records pertaining to ***all*** transactions in Danske Bank ADRs and/or Danske Bank common shares during the period from January 1, 2009, through December 17, 2018;

2. Is not and/or has not been:
   a. Danske Bank A/S ("Defendant");
   b. A person who served at any time during the Relevant Period as an officer or director of Defendant;
   c. An employee or former employee of the Defendant or any of its affiliates who has been terminated or has otherwise resigned in connection with the conduct alleged in the Complaint;
   d. Any Person who, as of the Claims Bar Date, has been the subject of criminal charges related to the conduct alleged in the Complaint or any related Commission action;
   e. Any firm, trust, corporation, officer, or other entity in which Defendant has or had a controlling interest;
   f. The Distribution Agent, its employees, and those Persons assisting the Distribution Agent in its role as the Distribution Agent;
   g. Any affiliates, assigns, creditors, heirs, distributees, spouses, parents, children, or controlled entities of any of the foregoing Persons or entities described in (a) – (f) above; or
   h. A purchaser or assignee of another Person's right to obtain a recovery from the Fair Fund for value; provided, however, that this provision shall not be construed to exclude those Persons who obtained such a right by gift, inheritance, or devise.

3. Has not submitted any other claim covering the same transactions or holdings in Danske Bank ADRs or Danske Bank Common Shares and is not aware of any other person having submitted such a claim on the Claimant's behalf;

4. Agrees to provide such additional information or documentation relating to the Claim Form as the SEC or the Distribution Agent may reasonably require;

5. Consents to the SEC, the Distribution Agent, and their respective agents using the information provided in this Claim Form, including, but not limited to, the Claimant's Social Security Number (or Taxpayer Identification Number), address, telephone number, brokerage account information, and trading information, as reasonably necessary to verify the Claim or the Claimant's identity. The Claimant acknowledges that such information will not be sold to any third party or used for any purpose other than administering and processing the Claim;

6. If executing this Claim Form on behalf of a beneficial owner of Danske Bank ADRs and/or Danske Bank Common Shares (e.g., an individual, corporation, partnership, or trust), represents and warrants that the Claimant has all requisite power and authority to execute this Claim Form, grant the release provided below, and take all other actions necessary or appropriate in connection with the submission and processing of this Claim Form on behalf of the beneficial owner, with the same force and effect as if the beneficial owner had personally executed and submitted the Claim Form; and

7. Agrees that it will have no claims against the Distribution Agent, its employees, agents, and attorneys in connection with the Distribution Plan and the administration of the Fair Fund, and will be deemed enjoined from prosecuting or asserting any such claims, except upon a finding by this Court of gross negligence or reckless disregard of duty under the Distribution Plan.

(continued on the next page)

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(Certification and Release - continued from the previous page)

I (we) declare under penalty of perjury under the laws of the United States of America that the foregoing information supplied by the undersigned in this Claim Form is true, correct, and complete, and that all documents submitted in support of the foregoing information are true and correct copies of what they purport to be.

Executed this _____day of _____ , 202____, in _____ ,_____
(Date) (Month) (City) (State / Country)

Signature of Claimant	(Type / Print name of Claimant)
Signature of Joint Claimant	(Type / Print name of Joint Claimant)
Signature of Person signing on behalf of Claimant	(Type / Print name of person signing on behalf of Claimant)
Capacity of person signing on behalf of Claimant (e.g., Administrator, Executor, Trustee, President, Custodian, POA, etc.)	

☐ For legal representatives of the beneficial owner(s), you must provide proof of your authority to act on the beneficial owner's behalf with this Claim Form. Please check this box to indicate that you have attached documentation authorizing you to complete this Claim Form on behalf of the beneficial owner named above.

*Failure to sign the **Certification and Release** may result in a delay in processing or the rejection of your claim.*

How did you hear about the Danske Bank Fair Fund?

(check one appropriate box below):

☐ Notice Received in the Mail or Email

☐ My Bank, Broker, or Financial Institution

☐ Newspaper Ad

☐ Social Media

☐ Other: _____

CLAIM FORM INSTRUCTIONS

Information About the Claimant (Nos. 1-3)

Please complete all information in Sections 1-3 in its entirety. The Claim Form must be completed by the beneficial owner of the Danske Bank ADRs and Danske Bank Common Shares (collectively, the "Securities") for which the Claim is being submitted, or by the beneficial owner's authorized legal representative. If the Securities were beneficially owned by more than one person or entity, all beneficial owners must be identified, and each beneficial owner, or an authorized legal representative, must sign the Claim Form. Failure to provide all requested information may delay the processing of the Claim or result in its rejection.

Transaction Information (Nos. 4-13)

The information requested in this section is necessary to accurately calculate your Claim. Please complete, in its entirety, each section applicable to your purchases and sales of the Securities. Report your beginning and ending holdings of the Securities, as well as all purchases and sales of the Securities during the Relevant Period. Identify any reported transactions that were short sales or purchases to cover a short position.

Supporting Documentation

Attach documentation supporting the information provided in your Claim Form. Acceptable supporting documentation may include: (a) monthly brokerage account statements; (b) trade confirmation slips; (c) applicable year-end account statements; (d) a signed letter from your broker, on firm letterhead, verifying the information provided; (e) deposit or escrow receipts evidencing your holdings; or (f) other equivalent documentation evidencing your transactions and holdings.

The documentation submitted must establish your beginning and ending holdings and all purchases and sales of the Securities during the Relevant Period. You must provide complete account statements for January 2009, September 2018, and December 2018, including all activity and the applicable holding position for each month. You must also provide documentation supporting all purchases and sales of the Securities during the Relevant Period.

Your name and account number or other identifying account information must appear on all documentation submitted. Handwritten alterations, self-generated schedules, and self-generated account statements are not acceptable. Failure to provide complete documentation supporting the requested holdings and transactions may delay the processing of your Claim.

Certification and Release (Pages 4-5)

You must read the Certification and Release and sign and date the signature page of the Claim Form. Your signature certifies that the information provided in the Claim Form, and all documentation submitted in support of the Claim, is true, accurate, and complete.

- A legal representative of a beneficial owner of the Securities (*e.g.*, an executor, guardian, trustee, or conservator) may sign the Certification and Release on behalf of the beneficial owner, provided that sufficient documentation establishing the representative's authority to act on behalf of the beneficial owner is submitted with the Claim Form.
- If the Securities were jointly owned, all beneficial owners, or an authorized legal representative of all beneficial owners, must sign the Certification and Release.
- If the Securities were owned by an entity (*e.g.*, a trust, estate, corporation, or partnership), the Certification and Release must be signed by an individual authorized to act on behalf of the entity. The signer must have authority to execute the Claim Form, make the certifications and grant the release provided therein, and take all other actions necessary in connection with the submission of the Claim Form. Documentary evidence establishing the signer's authority must be submitted with the Claim Form.

THIS CLAIM FORM MUST BE POSTMARKED ON OR BEFORE APRIL 9, 2027.

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REMINDER CHECKLIST

Before mailing your Claim Form, please read these reminders.

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1) **Submission Deadline and Delivery**: Your Claim Form must be submitted online or with a postmark on or before **April 9, 2027**. We cannot accept Claim Forms via email or fax. If you are submitting a paper Claim Form by mail, please direct the Claim Form to: **Danske Bank Fair Fund, P.O. Box 6110, Syracuse, NY 13217-6110**. If you wish to send your Claim Form via FedEx, UPS, or a similar service, please direct the Claim Form to: **Danske Bank Fair Fund, c/o RCB Fund Services LLC, 17 Technology Place, Suite 1, East Syracuse, NY 13057**.

If you require proof of delivery, please use a service that provides tracking and delivery confirmation or submit your claim via our website using the online claim filing portal.

2) **Electronic Submission**: If you submit your Claim electronically through our website, you do not need to mail a hard copy of the Claim Form.

3) **Certification and Release**: Carefully review and sign the Certification and Release beginning on page 4. If the Claim Form is being submitted on behalf of joint beneficial owners, all joint owners must sign the Certification and Release on page 5.

4) **Identification**: Provide the Beneficial Owner's ID Number and, if applicable, the ID Number(s) of all joint owners. Include a copy of the identification document referenced on page 1, Section 3 (e.g., passport, driver's license, national identification card, or other government-issued identification).

5) **Supporting Documentation**: Attach or upload all required supporting documentation. All documentation must be legible and, where applicable, identify the Claimant's name and account number and include the transaction date, quantity, total transaction amount, and security name, or ISIN. Do not submit original documents; submit copies only. **Retain Copies**: Keep a copy of the completed Claim Form and all supporting documentation for your records.

6) **Tax Certification:** Please provide the appropriate tax identification documentation with your claim, such as a Taxpayer Identification Number (TIN), IRS Form W-8BEN, or IRS Form W-8BEN-E, as applicable. Failure to provide the required tax documentation may result in the denial of your claim.

7) **Changes to Contact Information**: You are responsible for notifying the Distribution Agent of any changes to your information, including any change of address or other contact information. Notify the Distribution Agent by telephone at (833) 697-5040 (Domestic) or (315) 251-6012 (International), or by email at info@danskebankfairfund.com. Please include your Claim ID with any correspondence.

A Note about Providing your Personal ID:

We recognize the importance of protecting your personal information and take reasonable measures to safeguard the information collected in connection with your Claim. Personal information is collected and used only as necessary to administer and process your Claim. Verification of your identity is required before a payment may be issued to an Eligible Claimant.