

ELECTRONIC FILING INSTRUCTIONS ARENA SECURITIES LITIGATION

I. Important Notes – PLEASE READ

- In addition to these instructions, please review the details set forth in the claim form and notice prior to submitting claims.
- Electronic claim submission is available to institutions filing on their own behalf or on behalf of others as well as to claim preparers filing on behalf of clients, or to individuals filing a large number of transactions who have requested or been requested to file claims electronically.
- Electronic claim submissions MUST be accompanied by all **required** documents as set forth in Section IV of these instructions.
- Electronic claim submissions MUST be submitted in the **required** format, specified in this document.
- Provide all trade dates in **US** date format (MM/DD/YYYY).
- Electronic filers must provide for each claim submitted the holding positions and transactions in the eligible securities as set forth in Section II.
- NOTE: A separate claim should be submitted for each separate legal entity. However, if the legal entity that is the beneficial owner of the securities supporting the claim trades through multiple accounts (no matter how many separate accounts that entity has), all transactions of that beneficial owner through all of its accounts should be included in the same claim.
- You MUST provide the correct complete, unabbreviated name of the beneficial owner for each
 unique legal entity represented on your electronic claim submission in Column V of your file. Your
 submission will be rejected if you do not provide this information.
- **CLAIM FILING DEADLINE:** The claim filing deadline for this action is **April 13, 2018.** Any claim received after that date will be late.

II. Eligible Securities

COMMON STOCK OF ARENA PHARMACEUTICALS, INC

- Beginning holdings are the number of shares of Arena common stock owned at the opening of trading on March 17, 2008, long or short.
- Separately list each and every purchase/acquisition and sale of Arena common stock during the period from March 17, 2008 to April 27, 2011, inclusive.
 - o Information requested with respect to you purchases/acquisitions of Arena common stock from after the close of trading on January 27, 2011 through and including the close of trading on April 27, 2011 is needed in order to balance your claim only; purchases/acquisitions during this period, however, are not eligible under the Settlement and will not be used for purposes of calculating your Recognized Loss pursuant to the Plan of Allocation.
- Unsold holdings are the number of shares of Arena common stock owned at the close of trading on April 27, 2011, long or short.

III. Methods of Submission

Electronic files will not be deemed submitted unless the Claims Administrator sends you an email acknowledging receipt of your file. 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 electronic filing department at eClaim@choosegcg.com to inquire about your file and confirm it was received.

The following methods are available for submitting electronic claims:

1. INTERNET - GCG ICE® (www.gcgice.com)

- GCG ICE[®] is GCG's secure and user-friendly website designed to meet the claim filing needs of institutional investors and claim preparers¹ in securities class actions and similar administrations. Using GCG ICE[®], registered users have the ability to upload their electronic claim submissions directly and securely to GCG and the benefit of being able to view the history and status of these submissions 24 hours a day, 7 days a week. The history and status functionality features access to claim numbers and specific claim rejection reasons, with instructions on how to fix rejected claims.
- Please visit www.gcgice.com to register today so that you can benefit from this service in this settlement as well as other, future settlements.

¹ Although GCG ICE[®] was not designed for individuals, if you are an individual with a large number of transactions who requests or is requested to file claims electronically you may use this feature to file claims. Please contact the Electronic Filing Department for further information related to using GCG ICE[®].

2. EMAIL

- You may email your electronic claim submission to <u>eClaim@choosegcg.com</u>.
- If you choose to email your file, you MUST also attach all required documentation to the email as .pdf documents or equivalent.

3. MAIL

• You may send your electronic claim submission in the mail on a disk or CD along with all required documentation. Use the P.O. Box address on top of page 1 of the Proof of Claim and Release and add "Attn: Electronic Filing Department". If you need to send your submission via Federal Express or UPS, use the below street address:

Arena Securities Litigation c/o GCG Attn: Electronic Filing Department 5151 Blazer Parkway, Suite A Dublin, OH 43017

IV. Documentation Requirements

The required documentation outlined below <u>must</u> be submitted with your electronic file. Your electronic claims will <u>not</u> be eligible for consideration until all required documents are received. Please note that one single document may meet more than one requirement.

1. ONE SIGNED PROOF OF CLAIM AND RELEASE

- You must complete the Claimant Information Page, (Part I, Page 3) and Certification and Release Page, (Part IV, Pages 6-8) of a single Proof of Claim and Release form, which will serve as an "umbrella" or "master" claim form for all accounts on your electronic file.
- The claim form <u>must</u> be signed by an authorized signatory who is also listed on your signature verification document and state the capacity (job title) of the signatory.
- You may reference the term "Various Beneficial Owners" for the beneficial owner name if you are filing on behalf of multiple beneficial owners.

2. SIGNATURE VERIFICATION DOCUMENT

- If you are an institution filing on your own behalf or on behalf of other beneficial owners or a claim preparer filing on behalf of beneficial owners, you must provide a document verifying that the individual who signed the claim form and any supplemental documents is authorized to sign on your behalf. Some common types of documents that fulfill this requirement include the following (this list is not exclusive and non-US entities may have different documents that fulfill this requirement. If you are a non-US entity, you must submit an equivalent document):
 - Copy of filer's By-Laws, including signature page(s)
 - Copy of filer's Corporate Resolution, including signature page(s)
 - Notarized Affidavit signed by an officer of the filing institution or company clearly granting a specific individual(s) authorization or confirming his/her authority to sign on behalf of his/her institution or company.

3. DATA VERIFICATION DOCUMENT(S)

- If you are an institution filing on your own behalf or on behalf of other beneficial owners or a claim preparer filing on behalf of beneficial owners, you must provide a notarized affidavit or signed letter on your firm's letterhead which meets the below criteria:
 - Confirms the number of distinct claims and transactions in your file
 - Sets forth the source of the data for each claim included in your file
 - Attests to the truth and accuracy of the data for each claim in your file
 - Is executed by an authorized signatory who is listed on your firm's signature verification document, and specifies both the capacity and contact information of that signatory.

4. AUTHORIZATION DOCUMENT (IF FILING ON BEHALF OF CLIENTS OR CUSTOMERS)

- If you are an institution or claim preparer filing on behalf of beneficial owners other than yourself, you must provide a current document verifying that you are authorized to file and sign claims on behalf of the beneficial owners of the securities. Some common types of documents that fulfill this requirement include the following (this list is not exclusive and non-US entities may have different documents that fulfill this requirement. If you are a non-US entity, you must submit an equivalent document):
 - Power of Attorney
 - Service Agreement
 - Signed/dated letter on client's company letterhead specifically granting your company authority to file/sign claims on their behalf
 - Notarized affidavit or signed letter on your company's letterhead confirming your authority to file and sign claims on behalf of each client for whom you filed a claim. It must be executed by an officer of the company who is also listed on your signature verification document and reference the capacity and contact information of the signatory.

<u>ADDITIONAL DOCUMENTATION (IF REQUESTED) - DATA INTEGRITY AUDIT</u>

GCG may request filers, as deemed appropriate by GCG and/or Lead Counsel, who file claims electronically to provide additional documentation to support the claims submitted. This data integrity audit is designed to verify the overall integrity of a data file. Accordingly, you must provide all the requested documentation and the documentation provided must be independent in nature.

Even if you provided a letter/affidavit attesting to the truth and accuracy of the data you initially submitted with your electronic file, we will **require** specific documentary evidence, which may include trade confirmations, monthly statement, or equivalent, to independently verify the details of transactions and/or holding positions, if your file is selected for a data integrity audit.

FAILURE TO COMPLY WITH THIS AUDIT REQUEST WILL RESULT IN THE REJECTION OF ALL CLAIMS ON YOUR ELECTRONIC SUBMISSION

V. Required Filing Format

GENERAL INSTRUCTIONS

- Files should be submitted as an Excel spreadsheet.
- All fields in the below format <u>must</u> be included on your file.
- Any fields that do not apply to the claims you submitted must be left blank (do not delete any fields).
- Your file must include one header row with each of the column headings specified below.
- Your file <u>must</u> be sorted in the following order:
 - o complete correct name of the beneficial owner of the securities supporting the claim
 - o security identifier
 - o transaction type
- If a maximum character length for any field is specified, do not exceed the limit.
- <u>Do not</u> leave any blank rows on your file.
- Any files not in accordance with the below format are subject to rejection.
- For Excel spreadsheets:
 - o Whenever possible, your file should be limited to one tab that contains <u>all</u> the fields listed below
 - The "Length" column in the below format specifies the maximum number of characters for each Excel field as to which a maximum character number applies

REQUIRED FILE LAYOUT - TRANSACTIONAL DETAILS

COL	FIELD	START	LENGTH	NOTES
		POSITION		
A	Company Name	1	40	Name of Company for Mailing of Checks (see Address Notes below)
				• Include a "c/o" before your company name if you require checks made out to the beneficial owner c/o your company.
В	Address 1	41	40	Address 1 Information for Mailing of Checks (see Address Notes below)
С	Address 2	81	40	Address 2 Information for Mailing of Checks (see Address Notes below)
D	City	121	30	City for Mailing of Checks (see Address Notes below)
Е	State	151	2	2 Character State Abbreviation for Mailing of Checks (see Address Notes below)
F	Zip5	153	5	5 Digit Zip for Mailing of Checks (see Address Notes below)
G	Zip4	158	4	4 Digit Zip for Mailing of Checks (see Address Notes below)
Н	Country Code	162	2	2 character Country abbreviation (only for foreign addresses)
Ι	Short beneficial owner name	164	40	Short Name of Beneficial Owner, for printing/mailing purposes You MUST also provide the correct, complete, unabbreviated name of the beneficial owner in Column W of your submission
J	Account Number(s) of Beneficial Owner	204	30	List the numbers of all the accounts through which the beneficial owner trades
K	Beneficial Owner's SSN or Tax ID Number	234	8	Last four digits of Social Security Number or Tax ID Number of beneficial owner (leave column blank for foreign entities)
L	Security Identifier Number	242	14	CUSIP, ISIN, or SEDOL Number of the Security
M	Transaction Type	256	2	B = Beginning Holdings P = Purchase (includes purchases to cover short sales) S = Sale (includes short sales) U = Unsold (Ending) Holdings R = Free Receipt (transfer in) D = Free Deliver (transfer out) Note: When inputting beginning and unsold holdings, the trade date column must indicate the holding date. Price per share and net
N	Trade Date	258	10	amount columns <u>must</u> be left blank.
O	Quantity	268	20	Trade date in MM/DD/YYYY format (including foreign entities) Number of shares associated with this transaction (this value can
	Qualitity	200	20	Number of snares associated with this transaction (this value can ONLY be negative for short beginning or ending holdings positions)

P	Price Per Share	288	20	Price of each Share
				• This column should be blank <u>ONLY</u> when providing beginning
				or ending holdings or shares involved in a receipt or deliver.
Q	Aggregate Cost	308	20	Total value of the transaction (excluding commissions, taxes, and
	/ Amount			fees);
	Received			• This column should be blank <u>ONLY</u> when providing beginning
				or ending holdings or shares involved in a receipt or deliver.
R	Currency Type	328	3	Type of currency associated to transaction (USD, EUR, GBP, etc.)
S	Exercise /	331	1	$\mathbf{A} = $ Assigned, $\mathbf{E} = $ Exercised
	Assign /			• This column must be used if the common stock transaction is
	Expiration Flag			the result of the exercise or assignment of an option.
T	Submitting	332	20	If you are a third-party claim preparer filing on behalf of
	Filer's Client			clients either: (i) for the client as beneficial owner (in which
	Name(s)			case the entry in this field will be the same as the entry in Field
				I); or (ii) for a client which represents the beneficial owner(s),
				provide the complete name of your client in this column
U	Submitting	352	20	Name of filer submitting electronic claim
	Filer's Name			
V	Complete	372	n/a	Full Name of Beneficial Owner
	Beneficial			MUST be the correct, complete, unabbreviated name of the
	Owner Name			beneficial owner
				YOUR CLAIM SUBMISSION WILL BE REJECTED IF THIS
				INFORMATION IS NOT INCLUDED

REQUIRED FILE LAYOUT - ACCOUNT INFORMATION FOR SHARE DISTRIBUTION

COL	FIELD	START	LENGTH	NOTES
		POSITION		
Α	Account Number	1	30	Account Number from transactional data file
В	Account Type	31	1	Beneficial owner's type of account
				A. Individual/Sole Proprietor
				B. Joint Ownership
				C. Retirement accounts
				D. Private or public entity
				E. Custodianships
				F. Under Trust agreements
				G. Estate
	_			H. Other
С	Account	32	33	Description of beneficial owner's account type (select from the
	Description			following legend, or refer to pages 3 and 4 of the Proof of Claim
_				Form)
D	Name	65	33	Full Name of the beneficial owner or entity exactly as it appears on
				the account. Use of initials only is NOT acceptable. For example,
				use of J.G. Doe for account name John George Doe is not
				acceptable. This field includes:
				Beneficiary of Retirement Accounts
				Name of Minor for Custodianships
				Name of Trust for Trust Accounts
				Name of Estate for Estates
E	Name 2	98	33	USED FOR JOINT ACCOUNTS ONLY

	1			
				Full Name of the joint owner exactly as it appears on the account. Use of initials only is NOT acceptable. For example, use of J.G. Doe for account name John George Doe is not acceptable.
F	Custodian / Fiduciary	131	33	USED FOR RETIREMENT ACCOUNTS, CUSTODIANSHIPS OR ESTATES ONLY
				Full Name of the custodian or fiduciary exactly as it appears on the account. Use of initials only is NOT acceptable. For example, use of J.G. Doe for John George Doe is not acceptable.
G	State	164	2	USED FOR CUSTODIANSHIPS ONLY
				Indicate the State where the account is custodied
Н	Age of Minor	166	2	USED FOR CUSTODIANSHIPS ONLY
				Indicate the age of the minor with a custodial account
I	Name(s) of	168	33	USED FOR TRUST ACCOUNTS ONLY
	Trustee(s)			Full Name of the trustee(s) exactly as it appears on the account.
				Use of initials only is NOT acceptable. For example, use of J.G.
				Doe for John George Doe is not acceptable.
J	Date of Plan, Trust Agreement	201	10	USED FOR PLANS, TRUST ACCOUNTS OR ESTATES ONLY
	or Estate			Please indicate the date of the retirement plan, date the trust was
	Agreement			established or date of the estate agreement.

ACCOUNT INFORMATION FOR SHARE DISTRIBUTION - LEGEND

SECTION	ACCOUNT TYPE	ACCOUNT DESCRIPTION
Α	Individual/Sole	Individual
	Proprietor	
Α	Individual/Sole	Sole Proprietor
	Proprietor	
В	Joint Ownership	Joint Tenants (JTTEN) – includes right of survivorship (JTWROS)
В	Joint Ownership	Tenants in Common – Ten Com
В	Joint Ownership	Tenants by Entireties – Ten Ent
С	Retirements Accounts	IRA
С	Retirements Accounts	Roth IRA
С	Retirements Accounts	Keogh (Defined Benefit Plan or Defined Contribution Plan)
С	Retirements Accounts	Other (please describe)
D	Private or Public Entity	Corporation
D	Private or Public Entity	Partnership
D	Private or Public Entity	Limited Liability Company
D	Private or Public Entity	Non-Profit Organization
D	Private or Public Entity	Foundation
E	Custodianships	UCTA
E	Custodianships	UGMA
E	Custodianships	UTMA
F	Under Trust	
	Agreements	
G	Estate	Executor (EX)
G	Estate	Personal Representative (Per Rep)
G	Estate	Administrator (Adm)
G	Estate	Conservator (Cons)
G	Estate	Other. Please explain
Н	Other	Please describe

VI. Electronic Filing Notes

ADDRESSES

- Claims and checks (if the claim is eligible) will be created based on the information provided on your electronic file.
- If you require checks to be made out directly to the beneficial owner but still sent to your company, please include a "c/o" before your company name in column A of your file.
- If you require checks to be mailed to some other party (i.e. directly to the custodian bank for each beneficial owner or directly to the beneficial owner), please include *their* name in the 'Company Name' field of the file, but include your name in the 'Submitting Filer's Name' field (column V).

- If you require checks be made out directly to the beneficial owner, do not include **any** company name in the 'Company Name' field (column A) of the file.
- For foreign addresses, the two character country code must be provided in column H, all address information (including full country names and provinces) must be included in the two address fields (columns B-C), and the city, state, zip fields (columns D-G) should be left blank.
- If you are a third-party claim preparer filing on behalf of clients who represent the beneficial owner of the securities, you **must** provide the complete name of your client in column T of your electronic claim submission.

SECURITIES

- All transactions and holding positions <u>must</u> reference an appropriate security identifier (CUSIP, ISIN, or SEDOL) in column L of your file.
- All securities for each account must balance. This means that the beginning holdings plus purchases (including free receives) during the Class Period <u>MUST EQUAL</u> total sales (including free delivers) during the Class Period plus the ending/unsold holdings.
- Negative values may <u>only</u> be given for beginning and ending/unsold holdings (transaction type "U"). All other transactions must reflect positive values.

TRANSFERS

Free receive/free deliver (transfer in/out) transactions must be included in the claim data as this information is necessary in order for the claim to balance. Please note, free receives are <u>not</u> eligible for payment and will not be included in the calculation of the claim unless the shares received were purchased during the Class Period and you provide the original purchase information for these shares.

A free receive or transfer in must be reflected as a transaction type "R" and a free deliver or transfer out must be reflected as a transaction type "D" (prices and net amounts must be zero).