In Re: Prudential Financial, Inc. Data Breach Litigation

Case No. 2:24-cv-06818 United States District Court for the District of New Jersey

DATA INCIDENT SETTLEMENT CLAIM FORM

Your claim must be submitted online or postmarked by: October 3, 2025

#### **GENERAL INSTRUCTIONS**

**Who is eligible to file a claim?** The court has defined the Class this way: "All individuals within the United States of America whose Private Information was compromised in the Data Incident."

**Excluded from the Settlement Class** are: (1) Prudential and its officers and directors; (2) anyone who validly excludes themselves from the Settlement; (3) the Judge in this case, and the Judge's family and staff, (2) anyone responsible for perpetrating the Data Incident.

#### <u>COMPLETE THIS CLAIM FORM IF YOU ARE A CLASS MEMBER AND WISH TO RECEIVE</u> <u>ONE OR MORE OF THE FOLLOWING SETTLEMENT BENEFITS</u>

#### **AVAILABLE BENEFITS**

Prudential will establish a Settlement Fund of \$4,750,000.00. The Settlement Fund will first be used to pay courtapproved attorneys' fees and costs, Service Awards for the Plaintiffs, and the costs of administering the Settlement. All of the remaining funds will be used to pay for the benefits described below.

You may claim **ONE** of the following benefits:

- (1) Documented Out-of-Pocket Losses
- (2) Social Security Number/Tax Identification Number Impact Payments
- (3) CCPA Payments (available to California residents only)
- (4) Pro Rata Cash Payments

You may claim <u>ONE</u> benefit. If you claim more than one benefit, you will receive payment only for the highest value benefit.

These benefits are explained on the following page. Please read the explanations carefully before completing this Claim Form.

### In Re: Prudential Financial, Inc. Data Breach Litigation

Case No. 2:24-cv-06818 United States District Court for the District of New Jersey

DATA INCIDENT SETTLEMENT CLAIM FORM

Your claim must be submitted online or postmarked by: October 3, 2025

# **EXPLANATION OF BENEFITS (CLAIM ONLY ONE)**

(1) Documented Out-of-Pocket Losses. If you incurred actual, <u>documented</u> out-of-pocket losses due to the Data Incident, you can get back up to **\$5,000.00**. The losses must have occurred between February 4, 2024, and October 3, 2025.

This benefit covers out-of-pocket expenses like:

- fees for credit reports, credit monitoring, or freezing and unfreezing your credit;
- cost to replace your IDs;
- charges incurred from actual identity theft, fraud, or other misuse of your personal information.

You need to send proof, like receipts, to show how much you spent or lost. You can also send notes or papers you made yourself to explain or support other proof, but those notes or papers alone <u>are not enough</u> to make a valid claim.

(2) Social Security Number/Tax Identification Number Impact Payments. If your Social Security Number or Tax Identification Number was exposed in the Data Incident, you can claim this benefit without proving you lost money.

We expect this payment to be **\$200.00 - \$599.00**. The actual payment amount will depend on the type of the different claims filed by all of the Class Members.

If you are not sure if qualify for this benefit, please contact the Settlement Administrator.

- (3) CCPA Payments (available to California residents only). If you live in California, a law called the California Consumer Privacy Act—CCPA—may allow you to claim a payment. To qualify, at least one of the following types of your personal information must have been exposed in the Data Incident:
  - driver's license, passport, Non-U.S. Nation Identification Number, or other government-issued identification
  - credit or debit card information
  - treatment, diagnosis, prescription, or health condition

You can claim this benefit without proving you lost money.

We expect this payment to be **\$100.00 - \$599.00**. The actual payment amount will depend on the type of the different claims filed by all of the Class Members.

If you are not sure if qualify for this benefit, please contact the Settlement Administrator.

(4) Pro Rata Cash Payments. If you do not qualify for benefits (1) - (3), you can still claim a Pro Rata Cash Payment. Once all litigation and administration costs have been paid, and all other benefits have been paid out, all of the money remaining in the Settlement Fund will be split evenly between Class Members who claim this benefit.

You can claim this benefit without proving you lost money.

In Re: Prudential Financial, Inc. Data Breach Litigation

Case No. 2:24-cv-06818 United States District Court for the District of New Jersey

DATA INCIDENT SETTLEMENT CLAIM FORM

Your claim must be submitted online or postmarked by: October 3, 2025

We do not have a current estimate of how much this payment will be—it will depend on the type of different claims filed by all of the Class Members.

The Settlement Agreement has complete details about these benefits. You can find a copy at www.prudentialfinancialdatabreach.com.

If you have questions about these benefits, you can ask for free help any time by contacting the Settlement Administrator at:

- Email: info@prudentialfinancialdatabreach.com
- Call toll free, 24/7: (833) 360-6875
- By mail:

Prudential Data Incident Settlement c/o Settlement Administrator P.O. Box 25226 Santa Ana, CA 92799

# THE EASIEST WAY TO SUBMIT YOUR CLAIMS IS ONLINE AT WWW.PRUDENTIALFINANCIALDATABREACH.COM

You may also print out and complete this Claim Form, and submit it by U.S. mail to:

Prudential Data Incident Settlement c/o Settlement Administrator P.O. Box 25226 Santa Ana, CA 92799

An electronic image of the completed Claim Form can also be emailed to info@prudentialfinancialdatabreach.com.

You must submit online, mail, or email your Claim Form by October 3, 2025.

In the event the Settlement Administrator determines that your submitted Claim Form is incomplete or deficient in any other way, the Settlement Administrator will notify you of the deficiency. You will have an opportunity to cure the noted deficiency or to contact the Settlement Administrator to assist in curing the noted deficiency. You must then resubmit your Claim Form so the Claims Administrator can determine whether the noted deficiency has been cured.

In the event that you do not respond to the notice of deficiency or fail to take steps to cure the noted deficiency, you will be precluded from recovery in connection with the Settlement and if you fail to submit a request for exclusion, you will have released your claim.

In Re: Prudential Financial, Inc. Data Breach Litigation

Case No. 2:24-cv-06818 United States District Court for the District of New Jersey

DATA INCIDENT SETTLEMENT CLAIM FORM

Your claim must be submitted online or postmarked by: October 3, 2025

#### I. CLASS MEMBER NAME AND CONTACT INFORMATION

Print your name and contact information below. You must notify the Settlement Administrator if your contact information changes after you submit this claim form. All fields are required. **Please print legibly.** 

First	Nam	ie						-			-			-	 	 	
Last Name																	
Address 1 (street name and number)																	
Address 2 (apartment, unit, box number)																	
City																	
State ZIP Code																	
										-							
Email Address (if known)																	
Tele	phone	e Nun	nber														
Notice ID (if known)																	
				,													

In Re: Prudential Financial, Inc. Data Breach Litigation

Case No. 2:24-cv-06818 United States District Court for the District of New Jersey

DATA INCIDENT SETTLEMENT CLAIM FORM

Your claim must be submitted online or postmarked by: October 3, 2025

### **II. DOCUMENTED OUT-OF-POCKET LOSSES**

Check this box if you would like to claim reimbursement for <u>documented</u> out-of-pocket losses. You can get back up to \$5,000.00

Please complete the table below, describing the supporting documentation you are submitting.

Description of Documentation Provided	Amount
Example: Fee for credit report	\$40
TOTAL OUT-OF-POCKET LOSSES:	

If you have more expenses than rows, you may attach additional sheets of paper to account for them. Please print your name and sign the bottom of each additional sheet of paper.

# **III. SOCIAL SECURITY NUMBER/TAX IDENTIFICATION NUMBER IMPACT PAYMENT**

Check this box if you qualify and would like to claim a Social Security Number/Tax Identification Number Impact Payment.

You do not need to provide supporting documentation.

# IV. CCPA PAYMENT (AVAILABLE TO CALIFORNIA RESIDENTS ONLY)

□ Check this box if you qualify and would like to claim a CCPA Payment.

You do not need to provide supporting documentation.

### V. PRO RATA CASH PAYMENT

Check this box if you qualify would like to claim a Pro Rata Cash Payment.

Questions? Call (833) 360-6875 Toll-Free or Visit www.prudentialfinancialdatabreach.com

In Re: Prudential Financial, Inc. Data Breach Litigation

Case No. 2:24-cv-06818 United States District Court for the District of New Jersey

#### DATA INCIDENT SETTLEMENT CLAIM FORM

Your claim must be submitted online or postmarked by: October 3, 2025

You do not need to provide supporting documentation.

# VI. PAYMENT OPTIONS

**BY MAIL**: If you submit this Claim Form by mail and your claim is approved, you will receive a paper mailed check to the address you provide on this form.

**DIGITAL**: If you submit a Claim Form electronically on the www.prudentialfinancialdatabreach.com website, and do not submit a Claim Form by mail, you will have the option to select a digital payment via PayPal, Venmo, or Zelle. A digital payment option is only available on the website.

## VII. ATTESTATION & SIGNATURE

I swear and affirm on penalty of perjury that the information provided in this Claim Form, and any supporting documentation provided is true and correct to the best of my knowledge. I understand that my claim is subject to verification and that I may be asked to provide supplemental information by the Settlement Administrator before my claim is considered complete and valid.

Signature

Printed Name

Date