

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

IN RE GORES HOLDINGS IV, INC.
STOCKHOLDER LITIGATION

CONSOLIDATED
C.A. No. 2023-0284-LWW

PROOF OF CLAIM

I. GENERAL INSTRUCTIONS

1. To recover as a member of the Class based on your claims in the action entitled *In re Gores Holdings IV, Inc. Stockholder Litigation*, Consolidated C.A. No. 2023-0284-LWW (the “Action”), you must complete and, on page 7 hereof, sign this Proof of Claim. If you fail to submit a timely and properly addressed (as set forth in paragraph 3 below) Proof of Claim, 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.

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

3. THE COURT-APPOINTED SETTLEMENT ADMINISTRATOR FOR THIS ACTION MUST RECEIVE YOUR COMPLETED AND SIGNED PROOF OF CLAIM, ACCOMPANIED BY COPIES OF THE DOCUMENTS REQUESTED HEREIN, AT THE FOLLOWING MAILING ADDRESS OR THROUGH THE FOLLOWING WEBSITE:

Gores IV Stockholder Litigation
c/o A.B. Data Ltd.
P.O. Box 170500
Milwaukee, WI 53217

Online submissions: www.GoresIVStockholderSettlement.com

YOUR PROOF OF CLAIM MUST BE SUBMITTED ONLINE OR RECEIVED BY MAIL NO LATER THAN August 13, 2025.¹

If you are NOT a member of the Class, as defined in the Notice of Pendency and Proposed Settlement of Stockholder Class Action, Settlement Hearing, and Right to Appear (the “Notice”), DO NOT submit a Proof of Claim.

4. If you are a member of the Class, you will be bound by the terms of any judgment entered in the Action, including the releases provided therein, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM.

II. CLAIMANT IDENTIFICATION

If you held Eligible Shares in your name, you are the beneficial holder as well as the record holder. If, however, you held Eligible Shares that were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial holder and the third party is the record holder.

Use Part I of this form entitled “Claimant Identification” to identify each holder of record (“Record Owner”), if different from the beneficial holder of the Eligible Shares which form the basis of this claim. **THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL HOLDER OR THE LEGAL REPRESENTATIVE OF SUCH HOLDER OF THE SHARES UPON WHICH THIS CLAIM IS BASED.**

¹ Proofs of Claim that are legibly postmarked no later than August 13, 2025, will be treated as received on the postmark date. *Please be advised that the U.S. Postal Service may not postmark mail which is not presented in person.*

All joint holders must sign this claim. Executors, administrators, guardians, conservators, and trustees must complete and sign this claim on behalf of persons represented by them and their authority must accompany this claim and their titles or capacities must be stated. The last four digits of the Social Security Number (or full and complete 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.

If you are acting in a representative capacity on behalf of a member of the Class (for example, as an executor, administrator, trustee, or other representative), you must submit evidence of your current authority to act on behalf of that Class Member. Such evidence would include, for example, letters testamentary, letters of administration, or a copy of the trust documents.

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 such claimants **MUST** also submit a manually signed paper Proof of Claim listing all their transactions whether or not they also submit electronic copies. If you wish to submit your claim electronically, you must contact the Settlement Administrator at info@GoresIVStockholderLitigation.com to obtain the required file layout. Any file not in accordance with the required electronic filing format will be subject to rejection. Only one claim should be submitted for each separate legal entity and the complete name of the beneficial holders(s) of the securities must be entered when called for. Distribution payment must be made by check or electronic payment payable to the Authorized Claimant (beneficial account holder). The third-party filer shall not be the payee of any distribution payment check or electronic distribution payment. No electronic files will be considered to have been properly submitted unless the Settlement Administrator issues to the claimant a written acknowledgement of receipt and acceptance of electronically submitted data.

III. CLAIM FORM

Use Part II of this form entitled “Schedule of Transactions in shares of Gores Holdings IV. Inc. (“Gores IV”) Class A Common Stock or UWM Holdings Corp. (“UWM”) Common Stock” to supply all required details of your holdings, purchase(s), and sale(s) of Gores IV Class A Common Stock or UWM Common Stock. 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.

On the schedules, provide all of the requested information with respect to: (i) *all* of the shares of Gores IV Class A Common Stock held by you as of the close of the market on January 15, 2021; (ii) *all* of your purchases and sales (including any redemptions by Gores IV or UWM) of shares of your Gores IV Class A Common Stock or UWM Common Stock, after the close of the market on January 15, 2021 through March 7, 2023, regardless of whether such transactions resulted in a profit or loss; and (iii) if applicable, *all* of the shares of UWM Common Stock that you held as of the close of the market on March 7, 2023. Failure to report all such transactions may result in the rejection of your claim.

List these transactions separately and in chronological order: (i) by number of shares of Gores IV Class A Common Stock held at the close of the market on January 15, 2021; (ii) then by purchase and sale date for all shares of Gores IV Class A Common Stock or UWM Common Stock after the close of the market on January 15, 2021 through March 7, 2023, beginning with the earliest; (iii) then, if applicable, all of the shares of UWM Common Stock that you held as of the close of the market on March 7, 2023. You must accurately provide the month, day, and year of each transaction you list.

Copies of stockbroker confirmation slips, stockbroker statements, or other documents evidencing: (i) your holdings of Gores IV Class A Common Stock as of the close of the market on January 15, 2021; (ii) your subsequent purchases and sales of Gores IV Class A Common Stock or UWM Common Stock through March 7, 2023; and (iii) your holdings of UWM Common stock as of the close of the market on March 7, 2023 should be attached to your claim. If any such documents are not in your possession, please obtain a copy or equivalent documents from your broker because these documents are necessary to prove and process your claim. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.

PLEASE NOTE: As set forth in the Plan of Allocation, each Authorized Claimant shall receive his, her, its, or their pro rata share of the Net Settlement Fund. If the prorated payment to any Authorized Claimant calculates to less than \$10.00, it will not be included in the calculation and no distribution will be made to that Authorized Claimant.

IN THE COURT OF CHANCERY OF THE STATE OF DELAWARE

In re Gores Holdings IV, Inc. Stockholder Litigation, Consolidated C.A. No. 2023-0284-LWW

PROOF OF CLAIM
Must Be Received No Later Than:

August 13, 2025

Please Type or Print

PART I: CLAIMANT IDENTIFICATION

Beneficial Owner's Name (First, Middle, Last)

Street Address

City

State or Province

Zip Code or Postal Code

Country

Last Four Digits of Social Security Number or
Taxpayer Identification Number

Individual
Corporation/Other

Area Code

Telephone Number (work)

Area Code

Telephone Number (home)

Email Address

Record Owner's Name (if different from beneficial owner listed above)

PART II: SCHEDULE OF TRANSACTIONS IN GORES IV CLASS A COMMON STOCK OR UWM COMMON STOCK

1. NUMBER OF ELIGIBLE SHARES* – State the total number of shares of Gores IV Class A common stock held as of the close of trading on January 15, 2021. (Must be documented.) If none, write “zero” or “0.” _____				Confirm Proof of Position Enclosed <input type="radio"/>
2. PURCHASES/ACQUISITIONS FROM JANUARY 16, 2021 THROUGH MARCH 7, 2023 – Separately list each and every purchase or acquisition (including free receipts) of Gores IV Class A common stock or UWM common stock from after the close of trading on January 15, 2021 through the close of trading on March 7, 2023. (Must be documented.)				
Date of Purchase/ Acquisition (List Chronologically) (Month/Day/Year)	Number of Shares Purchased/Acquired	Purchase/Acquisition Price Per Share	Total Purchase/ Acquisition Price (excluding any taxes, commissions, and fees)	Confirm Proof of Purchase Enclosed
/ /		\$	\$	<input type="radio"/>
/ /		\$	\$	<input type="radio"/>
/ /		\$	\$	<input type="radio"/>
/ /		\$	\$	<input type="radio"/>
3. SALES FROM JANUARY 16, 2021 THROUGH MARCH 7, 2023 – Separately list each and every sale or disposition (including free deliveries) of Gores IV Class A common stock or UWM common stock after the close of trading on January 15, 2021 through the close of trading on March 7, 2023. (Must be documented.)				
				IF NONE, CHECK HERE <input type="radio"/>
Date of Sale (List Chronologically) (Month/Day/Year)	Number of Shares Sold	Sale Price Per Share	Total Sale Price (not deducting any taxes, commissions, and fees)	Confirm Proof of Sale Enclosed
/ /		\$	\$	<input type="radio"/>
/ /		\$	\$	<input type="radio"/>
/ /		\$	\$	<input type="radio"/>
/ /		\$	\$	<input type="radio"/>
5. HOLDINGS AS OF THE CLOSE OF MARCH 7, 2023 – State the total number of shares of UWM common stock held as of the close of trading on March 7, 2023. (Must be documented.) If none, write “zero” or “0.” _____				Confirm Proof of Position Enclosed <input type="radio"/>
IF YOU REQUIRE ADDITIONAL SPACE FOR THE SCHEDULE ABOVE, ATTACH EXTRA SCHEDULES IN THE SAME FORMAT. PRINT THE BENEFICIAL OWNER’S FULL NAME AND LAST FOUR DIGITS OF SOCIAL SECURITY/TAXPAYER IDENTIFICATION NUMBER ON EACH ADDITIONAL PAGE. IF YOU DO ATTACH EXTRA SCHEDULES, CHECK THIS BOX.				
<input type="checkbox"/>				

***“Eligible Shares” means those shares of Gores IV Common Stock owned by Class Members immediately after the Redemption Deadline that were not submitted for redemption in connection with the Merger.**

IV. SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS

I (We) submit this Proof of Claim under the terms of the Stipulation described in the Notice. I (We) also submit to the jurisdiction of the Court of Chancery of the State of Delaware with respect to my (our) claim as a Class Member and for purposes of enforcing the releases set forth in the [Proposed] Order and Final Judgment, attached as Exhibit D to the Stipulation.

I (We) further acknowledge that I am (we are) bound by and subject to the terms of any judgment that may be entered in the Action. I (We) agree to furnish additional information to the Settlement Administrator to support this claim if requested to do so. I (We) have not submitted any other claim in connection with the Action and know of no other person having done so on my (our) behalf.

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 the releases provided for in the [Proposed] Order and Final Judgment or any other part or portion thereof.

I (We) hereby warrant and represent that I (we) have included the requested required information about all of my (our) holdings, purchases or acquisitions, and sales or dispositions of Eligible Shares.

Executed this _____ day of _____ in _____
(Month/Year) (City/State/Country)

(Sign your name here)

(Type or print your name here)

(Capacity of person(s) signing, *e.g.*, Beneficial Purchaser or Acquirer, Executor or Administrator)

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

Reminder Checklist:

1. Please sign the above form and acknowledgment.
2. Remember to attach copies of supporting documentation.
3. ***Do not send*** originals of certificates or other documentation as they will not be returned.
4. Keep a copy of your Proof of Claim and all supporting documentation for your records.
5. If you desire an acknowledgment of receipt of your Proof of Claim please send it Certified Mail, Return Receipt Requested.
6. If you move after submitting this Proof of Claim, please notify the Settlement Administrator of the change in your address, otherwise you may not receive additional notices or payment.
7. Do not use red pen or highlighter on the Proof of Claim or supporting documentation. You must use black or blue ink or your claim may be deemed deficient.