

UNITED STATES DISTRICT COURT  
DISTRICT OF MASSACHUSETTS

In re SATCON TECHNOLOGY CORPORATION ) Master File No. 1:11-cv-11270-DPW  
SECURITIES LITIGATION ) CLASS ACTION  
\_\_\_\_\_) )  
This Document Relates To: ) )  
ALL ACTIONS. ) )  
\_\_\_\_\_)

**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 Satcon Technology Corporation Securities Litigation*, Master File No. 1:11-cv-11270-DPW (the "Litigation"), you must complete and, on page 5 hereof, sign this Proof of Claim form. If you fail to submit a timely and properly addressed (as set forth in paragraph 3 below) Proof of 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.

2. Submission of this Proof of Claim form, however, does not assure that you will share in the proceeds of the settlement of the Litigation.

3. YOU MUST MAIL OR SUBMIT ONLINE YOUR COMPLETED AND SIGNED PROOF OF CLAIM FORM ON OR BEFORE MAY 19, 2014, ADDRESSED AS FOLLOWS:

*Satcon Securities Litigation*  
Claims Administrator  
c/o Gilardi & Co. LLC  
P.O. Box 990  
Corte Madera, CA 94976-0990  
online submissions: [www.satconsecuritiessettlement.com](http://www.satconsecuritiessettlement.com)  
Phone: 1-877-285-5369

If you are NOT a Member of the Class (as defined in the Notice of Pendency of Class Action and Proposed Settlement, Motion for Attorneys' Fees and Settlement Fairness Hearing ("Notice")) DO NOT submit a Proof of Claim form.

4. If you are a Member of the Class and you have not timely requested exclusion in connection with the proposed settlement, you are bound by the terms of any judgment entered in the Litigation, including the releases provided therein, WHETHER OR NOT YOU SUBMIT A PROOF OF CLAIM FORM.

**II. CLAIMANT IDENTIFICATION**

If you purchased Satcon Technology Corporation ("Satcon") common shares and held the certificate(s) in your name, you are the beneficial purchaser as well as the record purchaser. If, however, you purchased Satcon common shares and the certificate(s) were registered in the name of a third party, such as a nominee or brokerage firm, you are the beneficial purchaser and the third party is the record purchaser.

Use Part I of this form entitled "Claimant Identification" to identify each purchaser of record ("nominee"), if different from the beneficial purchaser of the Satcon common shares that forms the basis of this claim. THIS CLAIM MUST BE FILED BY THE ACTUAL BENEFICIAL PURCHASER(S) OR THE LEGAL REPRESENTATIVE OF SUCH PURCHASER(S) OF THE SATCON COMMON SHARES UPON WHICH THIS CLAIM IS BASED.

All joint purchasers 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 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. CLAIM FORM

Use Part II of this form entitled "Schedule of Transactions in Satcon Common Shares" to supply all required details of your transaction(s) in Satcon common shares listed in Part II. 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 **all** of your purchases and **all** of your sales of Satcon common shares that took place between August 5, 2010 and November 7, 2011, inclusive, whether such transactions resulted in a profit or a loss. You must also provide all of the requested information with respect to **all** of the Satcon common shares you held at the close of trading on August 4, 2010, August 10, 2011, and November 7, 2011. Failure to report all such transactions may result in the rejection of your claim.

List each transaction separately and in chronological order, by trade date, beginning with the earliest. You must accurately provide the month, day, and year of each transaction you list.

The date of covering a "short sale" is deemed to be the date of purchase of Satcon common shares. The date of a "short sale" is deemed to be the date of sale of Satcon common shares.

Copies of broker confirmations or other documentation of your transactions in Satcon common shares should be attached to your claim. Failure to provide this documentation could delay verification of your claim or result in rejection of your claim.

**NOTICE REGARDING ELECTRONIC FILES:** Certain claimants with large numbers of transactions may request, or may be requested, to submit information regarding their transactions in electronic files. All claimants **MUST** submit a manually signed paper Proof of Claim form whether or not they also submit electronic copies. If you wish to file your claim electronically, you must contact the Claims Administrator at 1-877-285-5369 to obtain the required file layout. 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.

Official  
Office  
Use  
Only

UNITED STATES DISTRICT COURT  
DISTRICT OF MASSACHUSETTS  
*In re Satcon Technology Corporation  
Securities Litigation*

**Must Be Postmarked  
No Later Than  
May 19, 2014**

Master File No. 1:11-cv-11270-DPW  
PROOF OF CLAIM

Please Type or Print in the Boxes Below  
Do NOT use Red Ink, Pencil, or Staples



**PART I: CLAIMANT IDENTIFICATION**

Last Name  M.I.  First Name

Last Name (Co-Beneficial Owner)  M.I.  First Name (Co-Beneficial Owner)

IRA  Joint Tenancy  Employee  Individual  Other \_\_\_\_\_ (specify)

Company Name (Beneficial Owner - If Claimant is not an Individual) or Custodian Name if an IRA

Trustee/Asset Manager/Nominee/Record Owner's Name (If Different from Beneficial Owner Listed Above)

Account#/Fund# (Not Necessary for Individual Filers)

Social Security Number  —  —  Taxpayer Identification Number  —

Telephone Number (Primary Daytime)  —  —  Telephone Number (Alternate)  —  —

Email Address

**MAILING INFORMATION**

Address

Address

City  State  Zip Code

Foreign Province  Foreign Postal Code  Foreign Country Name/Abbreviation

FOR CLAIMS PROCESSING ONLY	OB <input type="text"/>	CB <input type="text"/>	<input type="radio"/> ATP <input type="radio"/> KE <input type="radio"/> ICI	<input type="radio"/> BE <input type="radio"/> DR <input type="radio"/> EM	<input type="radio"/> FL <input type="radio"/> ME <input type="radio"/> ND	<input type="radio"/> OP <input type="radio"/> RE <input type="radio"/> SH	MM / DD / YYYY	FOR CLAIMS PROCESSING ONLY
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**PART II. SCHEDULE OF TRANSACTIONS IN SATCON COMMON SHARES**

Proof Enclosed?

A. Number of Satcon common shares held at the close of trading on August 4, 2010:

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Y  
 N

B. Purchases of Satcon common shares between August 5, 2010 and November 7, 2011, inclusive:

PURCHASES				Total Purchase Price (Excluding Commissions, Taxes and Fees) Please round off to the nearest whole dollar	Proof of Purchase Enclosed?														
Trade Date(s) of Shares (List Chronologically)		Number of Shares Purchased																	
M	M	D	D	Y	Y	Y	Y												
1.								\$										00	<input type="radio"/> Y <input type="radio"/> N
2.								\$										00	<input type="radio"/> Y <input type="radio"/> N
3.								\$										00	<input type="radio"/> Y <input type="radio"/> N
4.								\$										00	<input type="radio"/> Y <input type="radio"/> N

IMPORTANT: If any purchase listed covered a "short sale," please mark Yes:  Yes

C. Sales of Satcon common shares between August 5, 2010 and November 7, 2011, inclusive:

SALES				Total Sales Price (Excluding Commissions, Taxes and Fees) Please round off to the nearest whole dollar	Proof of Sales Enclosed?													
Trade Date(s) of Shares (List Chronologically)		Number of Shares Sold																
M	M	D	D	Y	Y	Y	Y											
1.								\$									00	<input type="radio"/> Y <input type="radio"/> N
2.								\$									00	<input type="radio"/> Y <input type="radio"/> N
3.								\$									00	<input type="radio"/> Y <input type="radio"/> N
4.								\$									00	<input type="radio"/> Y <input type="radio"/> N

Proof Enclosed?

D. Number of Satcon common shares held at the close of trading on August 10, 2011:

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Y  
 N

Proof Enclosed?

E. Number of Satcon common shares held at the close of trading on November 7, 2011:

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Y  
 N

*If you require additional space, attach extra schedules in the same format as above. Sign and print your name on each additional page.*



**IV. SUBMISSION TO JURISDICTION OF COURT AND ACKNOWLEDGMENTS**

I (We) submit this Proof of Claim under the terms of the Amended Stipulation described in the Notice. I (We) also submit to the jurisdiction of the United States District Court for the District of Massachusetts with respect to my (our) claim as a Class Member and for purposes of enforcing the releases provided for in any judgment entered in the Litigation. I (We) further acknowledge that I am (we are) bound by and subject to the terms of any judgment that is entered in the Litigation, including the release of all Released Claims with respect to each and all of the Released Persons as set forth in the Judgment. I (We) agree to furnish additional information to the Claims Administrator to support this claim (including transactions in other Satcon securities) if requested to do so. I (We) have not submitted any other claim covering the same purchases or sales of Satcon common shares during the Class Period 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 judgment entered in the Litigation or any other part or portion thereof.

I (We) hereby warrant and represent that I (we) have included information about all of my (our) transactions in Satcon common shares that are the subject of this claim, and that occurred during the Class Period as well as the opening and closing positions in such securities held by me (us) on the dates requested in this claim form.

I (WE) DECLARE UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE UNITED STATES OF AMERICA THAT ALL OF THE FOREGOING INFORMATION SUPPLIED ON THIS PROOF OF CLAIM FORM BY THE UNDERSIGNED IS TRUE AND CORRECT.

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

\_\_\_\_\_  
(Sign your name here)

\_\_\_\_\_  
(Sign your name here)

\_\_\_\_\_  
(Type or print your name here)

\_\_\_\_\_  
(Type or print your name here)

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

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

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

Reminder Checklist:

- 1. Please sign the above declaration.
- 2. If this Claim is being made on behalf of Joint Claimants, then both must sign.
- 3. Remember to attach copies of supporting documentation, if available.
- 4. **Do not send** originals of certificates.
- 5. Keep a copy of your claim form and all supporting documentation for your records.
- 6. If you desire an acknowledgment of receipt of your claim form please send it Certified Mail, Return Receipt Requested.
- 7. If you move, please send your new address to:  
*Satcon Securities Litigation*  
Claims Administrator  
c/o Gilardi & Co. LLC  
P.O. Box 990  
Corte Madera, CA 94976-0990
- 8. **Do not use red pen or highlighter** on the Proof of Claim form or supporting documentation.

**THIS PROOF OF CLAIM MUST BE SUBMITTED ONLINE OR MAILED NO LATER THAN MAY 19, 2014,  
ADDRESSED AS FOLLOWS:**

*Satcon Securities Litigation*  
Claims Administrator  
c/o Gilardi & Co. LLC  
P.O. Box 990  
Corte Madera, CA 94976-0990  
www.satconsecuritiessettlement.com



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