

Information Sheet

Please list your purchase and sale transaction(s) in Sharecare, Inc. (NASDAQ: SHCR) securities between May 10, 2023 and March 28, 2024 (the "Class Period"), in the chart below. Please return completed form in the enclosed pre-paid envelope, by fax to 610-667-7056, or by scan/photo to info@ktmc.com or scan the QR code below. You may also submit your information online at www.ktmc.com/newcases.

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First Name Address Telephone Number Current Employer PURCHASES			Last Name City, State, Zip Email Address (non-work - please print clearly) Signature SALES								
						Buy Date	# Shares	Price per Share	Sell Date	# Shares	Price per Share
		od transactions and/or iece of paper if necess	r transactions in relate ary.	ed securities (options, bonds, or						
Are you a current or former employee of Sharecare , Inc. ? Yes / No (Circle)			Did you purchase shares of Sharecare , Inc. prior to the Class Period? Yes / No (Circle)								
LLP or you to file a lead Meltzer & Check, LLP, Check, LLP will contact authorizing us to contact	d plaintiff motion in its sole discreti t you to discuss the t you by email, ph	in this matter. Any information, believes that you might he matter and whether to ex- one or by other means regar	ship, nor an obligation on the tion you submit will be mai be an appropriate lead plain stablish an attorney client re rding this case. You are also k you, and please do not hesi	ntained as confid- ntiff candidate, Kolationship. By sign authorizing and	ential. If Kessler Topaz essler Topaz Meltzer & gning this form you are requesting us to contact						
If you do not want to	o be contacted	regarding future cases	, please indicate that by	checking this	box.						