

**Must Be
Postmarked
No Later Than
March 27, 2017**

**IN RE CORNERSTONE THERAPEUTICS INC.
STOCKHOLDER LITIGATION
c/o GCG
PO Box 9349
Dublin, OH 43017-4249
1-866-550-8035**

CNR



Claim Number:

Control Number:

PROOF OF CLAIM AND RELEASE

Please complete the Proof of Claim below if you were a beneficial owner of Cornerstone Therapeutics Inc. ("Cornerstone") common stock at the closing of the transaction consummated by Chiesi Farmaceutici S.p.A. ("Chiesi") and its subsidiary, Chiesi U.S. Corporation ("Merger Sub"), on February 3, 2014 ("Transaction"). Excluded persons and entities include: Michael Enright ("Enright"), Christopher Codeanne ("Codeanne"), James A. Harper ("Harper"), Michael Heffernan ("Heffernan"), Laura Shawver ("Shawver"), Craig A. Collard ("Collard"), Robert M. Stephan ("Stephan"), Anton Giogio Failla ("Failla"), Marco Vecchia ("Vecchia") (collectively, "Defendants"), members of the immediate family of any Defendant, any entity in which a Defendant has or had a controlling interest, Cornerstone, Chiesi, and Merger Sub, any person who was an officer of Cornerstone during the period from September 15, 2013 through and including February 3, 2014, and the legal representatives, heirs, successors, and assigns of any of the foregoing excluded parties.

This Proof of Claim must contain the name, address, and taxpayer identification number (TIN) of the beneficial owner(s). The TIN, consisting of the last four (4) digits of a valid Social Security number (SSN) for individuals or employer identification number (EIN) for business entities, trusts, estates, etc., and telephone number of the beneficial owner(s) may be used in verifying this claim; this information is required.

You must also provide the quantity of shares and the stock certificate numbers (if shares were held in certificate form; if shares were held through a brokerage account, certificate numbers would not be needed). You must sign the Proof of Claim in the space provided in order to make a valid claim. Please also provide your brokerage statement for February 2014 or a letter from your bank, broker, or other nominee indicating the quantity of shares held at the closing of the Transaction on February 3, 2014. If you held shares in certificate form, please provide confirmation from the transfer agent of surrender.

Important - This form should be completed **IN CAPITAL LETTERS** using **BLACK** or **DARK BLUE** ballpoint/fountain pen. Characters and marks used should be similar in the style to the following:

A B C D E F G H I J K L M N O P Q R S T U V W X Y Z 1 2 3 4 5 6 7 0

¹The last four digits of the taxpayer identification number (TIN), consisting of a valid Social Security Number (SSN) for individuals or Employer Identification Number (EIN) for business entities, trusts, estates, etc., and telephone number of the beneficial owner(s) may be used in verifying this claim.

PART II – HOLDINGS ON FEBRUARY 3, 2014

<p>A. HOLDINGS ON FEBRUARY 3, 2014: State the number of shares of Cornerstone common stock surrendered at the closing of the Transaction on February 3, 2014. Documentation includes brokerage statements from February, 2014 showing the quantity of shares surrendered, a letter from your bank, broker, or other nominee indicating the quantity of shares surrendered, or proof of stock certificate surrender (<i>Must be documented</i>).</p>	<div style="display: flex; justify-content: space-around; align-items: center;"><div style="border: 1px solid black; width: 30px; height: 30px;"></div><div style="border: 1px solid black; width: 30px; height: 30px;"></div><div style="border: 1px solid black; width: 30px; height: 30px;"></div><div style="border: 1px solid black; width: 30px; height: 30px;"></div><div style="border: 1px solid black; width: 30px; height: 30px;"></div><div style="border: 1px solid black; width: 30px; height: 30px;"></div></div> <p style="margin-top: 5px;">Shares</p>
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Shares

B. STOCK CERTIFICATE NUMBERS (If applicable): List below the stock certificate numbers for all Cornerstone common stock surrendered pursuant to the Transaction on February 3, 2014 for all shares NOT HELD IN A BROKERAGE ACCOUNT. Be sure to attach documentation of surrender such as a letter accompanying a payment for surrendered shares from the transfer agent or your broker.

Proof of surrender enclosed?

[illegible]☐ Yes☐ No[illegible]☐ Yes☐ No[illegible]☐ Yes☐ No[illegible]☐ Yes☐ No[illegible]☐ Yes☐ No

IF YOU NEED ADDITIONAL SPACE TO LIST YOUR TRANSACTIONS YOU MUST
PHOTOCOPY THIS PAGE AND CHECK THIS BOX ☐
IF YOU DO NOT CHECK THIS BOX THESE ADDITIONAL PAGES WILL NOT BE REVIEWED

**PART III - RELEASE AND CERTIFICATION**

On behalf of myself (ourselves) or the beneficial owner, I (we) am (are) authorized to file this Proof of Claim, and on behalf of each of my (our, his, her, its) heirs, agents, executors, trustees, administrators, predecessors, successors, and assigns, I (we, he, she, it) hereby acknowledge that as of the Effective Date, I (we, he, she, it) shall (i) be deemed to have fully, finally, and forever waived, released, discharged, and dismissed each and every one of the Released Claims (as defined in the Notice of Pendency of Class Action, Proposed Settlement of Class Action, and Settlement Hearing ("Notice")), as against each and every one of the Released Parties; (ii) forever be barred and enjoined from commencing, instituting, prosecuting, or maintaining any of the Released Claims against any of the Released Parties; and (iii) be deemed to have covenanted not to sue any Released Party on the basis of any Released Claim or, unless compelled by operation of law, to assist any person in commencing or maintaining any suit relating to any Released Claim against any Released Party.

I certify that I (we) am (are) or, if I am filing on behalf of another, that party, is not an excluded party under the terms of the Stipulation. Excluded parties include: Defendants, members of the immediate family of any Defendant, any entity in which a Defendant has or had a controlling interest, Cornerstone, Chiesi, and Merger Sub, any person who was an officer of Cornerstone during the period from September 15, 2013 through and including February 3, 2014, and the legal representatives, heirs, successors, and assigns of any of the foregoing excluded parties.

By signing and submitting this Proof of Claim, the claimant(s) or the person(s) who represent(s) the claimant(s) certifies (certify) as follows:

1. That I (we) have read the Notice, and the Proof of Claim, including the releases provided for in the settlement;
2. That the claimant(s) is (are) a Class Member(s), as defined in the Notice, and is (are) not excluded from the Class;
3. That the claimant(s) owned the Cornerstone common stock identified in the Proof of Claim and has (have) not assigned the claim against the Released Parties to another, or that, in signing and submitting this Proof of Claim, the claimant(s) has (have) the authority to act on behalf of the owner(s) thereof;
4. That the claimant(s) has (have) not submitted any other claim covering the same purchases, acquisitions, sales, or holdings of Cornerstone common stock and knows (know) of no other person having done so on his/her/its/their behalf;
5. That the claimant(s) submits (submit) to the jurisdiction of the Court with respect to his/her/its/their claim and for purposes of enforcing the releases provided for in the settlement;
6. That I (we) agree to furnish such additional information with respect to this Proof of Claim as the Paying Agent or the Court may require;
7. That I (we) acknowledge that the claimant(s) will be bound by and subject to the terms of the Stipulation and Agreement of Compromise and Settlement and any judgment that may be entered in the litigation, including the releases and covenants set forth therein; and
8. That I (we) certify that I am (we are) not subject to backup withholding under the provisions of Section 3406(a)(1)(c) of the Internal Revenue Code.

NOTE: If you have been notified by the Internal Revenue Service that you are subject to backup withholding, please strike the language that you are not subject to backup withholding in the certification above. The Internal Revenue Service does not require your consent to any provision other than the certification required to avoid backup withholding.

UNDER THE PENALTIES OF PERJURY, I (WE) CERTIFY THAT ALL OF THE INFORMATION PROVIDED BY ME (US) ON THIS FORM IS TRUE, CORRECT, AND COMPLETE AND THAT THE DOCUMENTS SUBMITTED HERewith ARE TRUE AND CORRECT COPIES OF WHAT THEY PURPORT TO BE.

(Signature of Claimant)

(Signature of Joint Claimant)

(Type or print your name here)

(Type or print your name here)

(Date)

(Capacity of Persons signing, e.g., Beneficial Purchaser, Executor or Administrator)



REMINDER CHECKLIST

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

1. Remember to sign the above Proof of Claim and Release Form.
2. Remember to attach only **copies** of acceptable supporting documentation, a complete list of which can be found on our website.
3. DO NOT SEND ORIGINALS OF SECURITIES CERTIFICATES OR ANY SUPPORTING DOCUMENTS.
4. Keep copies of your completed Proof of Claim and all documentation submitted for your records.
5. If you desire an acknowledgment of receipt of your claim form, please send it Certified Mail, Return Receipt Requested, or its equivalent. **You will bear all risks of delay or non-delivery of your claim.** The Paying Agent will acknowledge receipt of your Proof of Claim by mail within 60 days. Your claim is not deemed filed until you receive an acknowledgment postcard. If you do not receive an acknowledgment postcard within 60 days, please call the Paying Agent toll free at **1-866-550-8035**.
6. If your address changes or if these documents were sent to an old or incorrect address, you must send the Paying Agent **written** notification of your new address. Otherwise, any funds allocated to your claim are subject to forfeiture.
7. Do not use highlighter on the Proof of Claim or supporting documentation.
8. If you have any questions or concerns regarding your Proof of Claim, please contact the Paying Agent at the address listed below or at **1-866-550-8035**.

**THIS PROOF OF CLAIM MUST BE POSTMARKED NO LATER THAN MARCH 27, 2017
AND MUST BE MAILED TO:**

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