

RESPONSE DEADLINE
Postmarked By
DECEMBER 29, 2008

SEC v. MBIA Fair Fund
U.S. District Court Southern District of New York
07 Civ. 658 (LLS)

Official Use Only

CLAIM FORM

Please print clearly in black ink.

Step 1 – Claimant Identification

Name of Beneficial Owner (First, Middle, Last) or Entity Name if Beneficial Owner is an Entity

Name of Joint Beneficial Owner, if any (First, Middle, Last)

Representative Name (if different than Beneficial Owner, attach documentation for your authority to act on behalf of the Beneficial Owner)

Street Address

Street Address

City

State/Province

Zip or Postal Code

Country

Social Security Number of Beneficial Owner

OR

Taxpayer Identification Number

Account Number/Fund Number (if available)

Email address

() -

Daytime Telephone Number (including area code)

() -

Evening Telephone Number (including area code)

If you have additional questions, please call 1-888-356-0275 or visit our website at www.SECMBIAfairfund.com.

Step 2 – Provide MBIA Inc. Common Stock Holdings

Number of shares of MBIA Inc. common stock held at the **close of trading on**

September 10, 1998 _____

If no shares were held on this date, check here

November 18, 2004 _____

If no shares were held on this date, check here

November 22, 2004 _____

If no shares were held on this date, check here

IMPORTANT NOTE: If you did not hold any shares of MBIA common stock on November 18, 2004 OR November 22, 2004, your claim will not be eligible for a payment and you do not need to file a Claim Form.

Remember to sign your Claim Form on the reverse side.



Step 3 – Please submit supporting documentation for your claim.

You must submit documentation supporting your share holdings on the dates indicated in Step 2.

Acceptable documentation includes:

- (a) your monthly stock brokerage or investment account statements with trading history for the month ending September 30, 1998 and the month ending November 30, 2004; or
- (b) a signed letter from your broker on firm letterhead verifying that the share balances you have provided are accurate.

All documentation must be legible and include your account name and MBIA security name or CUSIP. Note that trade dates, as opposed to settlement dates, will be used in fixing the purchase and sale dates. Please send copies of documents, not originals, and keep a copy of your claim for your records.

Step 4 – Please review the certification below.

The undersigned represents and certifies UNDER PENALTY OF PERJURY that:

1. I am not:
 - a) a director or officer, or former director or officer, of MBIA or any of its past or present affiliates (or an affiliate, assign, heir, distributee, spouse, parent, child, or controlled entity of theirs) who served in such capacity on or after September 11, 1998, the commencement of the Fraud Period;
 - b) an employee of MBIA or of any of its past or present affiliates who has been terminated for cause in connection with the violations alleged in the Commission’s complaint in this action or any related Commission action, or who was otherwise terminated or has resigned in connection with the violations alleged in the Commission’s complaint in this action or any related Commission action (or an affiliate, assign, heir, distributee, spouse, parent, child, or controlled entity of any such employee);
 - c) Axa Re Finance, (“Axa”), Meunchener Rueckversicherungs-Gesellschaft AG (“Munich”) or Zurich Reinsurance (North America), Inc., now known as Converium Reinsurance (North America) Inc., (“Zurich”) or a past or present affiliate of theirs or a director or officer, or former directors or officers, of Axa, Munich or Zurich or any past or present affiliate of theirs (or any affiliate, assign, heir, distributee, spouse, parent, child, or controlled entity of theirs) who served in such capacity on or after September 11, 1998, the commencement of the Fraud Period; or
 - d) an individual or entity who, as of the Claims Bar Date, has been the subject of criminal charges related to the violations alleged in the Commission’s complaint in this action or in any related Commission action including any action by the New York State Attorney General’s Office (or an affiliate, assign, heir, distributee, spouse, parent, child, or controlled entity of any such individual).
2. I have not (i) assigned my rights to a recovery in the Commission’s lawsuit against MBIA to a third party; or (ii) been assigned a third party’s rights to any such recovery (other than by right of inheritance or devise).
3. I hereby warrant and represent to the best of my knowledge that I have included information about the number of shares of MBIA Inc. common stock held by me at the close of trading on September 10, 1998, November 18, 2004 and November 22, 2004. All of the share balances listed above are accurate and complete.
4. The check should be issued to the name that appears on page 1 of this Claim Form.

Step 5 – Please sign the certification below.

I certify that my share balance information as shown is correct and complete, and all the statements above are correct. I understand that fraudulent claims made under this settlement are subject to prosecution.

_____/_____/_____
Month/Day/Year

Signature of Claimant

(Type or Print Your Name Here)

_____/_____/_____
Month/Day/Year

Signature of Joint Claimant (if any)

(Type or Print Your Name Here)

(Capacity of person(s) signing, e.g. beneficial purchaser(s), executor, administrator, trustee, etc.)

Please submit your Claim Form and the required documentation POSTMARKED NO LATER THAN DECEMBER 29, 2008 TO:
SEC v. MBIA Fair Fund, Laurence Storch, Distribution Agent, P.O. 921, New York, NY 10268-0921

If you have additional questions, please call 1-888-356-0275 or visit our website at www.SECMBIAfairfund.com.

