



## **Direct Share Purchase and Sale Program**

Broadridge Corporate Issuer Solutions  
P.O. Box 1342  
Brentwood, NY 11717-0718  
Phone: (877) 910-5385  
Fax: (215) 553-5402

Dear Shareholder,

Thank you for contacting Broadridge Shareholder Services expressing interest in opening a new account or managing the dividend elections on an existing account with Kellogg Company. Enclosed is the document you requested. Please read the content carefully and follow all of the instructions provided.

Things to remember before sending in your completed form:

1. Make sure your form has all of the required signatures. If the account has a joint tenant registration, both shareholders are required to sign. If you are signing for the shareholder, please include your title (i.e., POA, Custodian, Executor) after your signature and the proper documentation supporting your title if applicable (i.e. appointment documents).
2. If opening a new account, include a check made payable to "Broadridge".
3. Consult The Kellogg Company Direct Stock Purchase and Dividend Reinvestment Plan Prospectus for additional information about the program, including purchase dates, minimum and maximum investment amounts, and any fees associated with the program.

If you have any questions regarding your shareholder account, please contact us at:

Telephone Number: (877) 910-5385

E-mail: [shareholder@broadridge.com](mailto:shareholder@broadridge.com)

Please retain a copy of all documents for your records. Please return the above items to:

**Regular Mail**

**Broadridge Shareholder Services  
c/o Broadridge Corporate Issuer Solutions  
P.O. Box 1342  
Brentwood, NY 11717-0718**

**OR**

**Overnight Mail**

**Broadridge Shareholder Services  
c/o Broadridge Corporate Issuer Solutions  
1155 Long Island Avenue  
Edgewood, NY 11717-8309  
ATTN: IWS**

Sincerely,

Correspondence Department  
Broadridge Corporate Issuer Solutions  
Shareholder Services



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### IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT

To help the government fight the funding of terrorism and money laundering activities, Federal Law requires all financial institutions to obtain, verify, and record information that identifies each person who opens an account. What this means for you: When you complete an enrollment application, we will ask for your name, address, date of birth, and other information that will allow us to identify you. Please be aware that we will verify the information you provide and may also ask for copies of your driver's license or other identifying documents. Further, we will collect and hold information provided to us pursuant to our Privacy Statement, available at [www.shareholder.broadridge.com](http://www.shareholder.broadridge.com).

### SECTION I - EXISTING SHAREHOLDERS - PLEASE PRINT

1. Company Name Kellogg Company (Please see Plan Prospectus for enrollment eligibility requirements.)
2. Account Number 2462 -
3. Account Registration \_\_\_\_\_
4. Last Four of Owner's Social Security Number or Tax Identification Number \_\_\_\_\_
5. Account Address \_\_\_\_\_  
 Street City State Zip Code  
 (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
 Daytime Phone Evening Phone

**\* Please proceed to Section IV to manage Account Elections.**

### SECTION II - NEW SHAREHOLDERS - PLEASE PRINT

1. Company Name Kellogg Company (Please see Plan Prospectus for enrollment eligibility requirements.)
2. Initial Investments (Make checks payable to Broadridge)  
 As a new shareholder, I wish to enroll in the Program by making an initial investment. Enclosed is my check or money order for:  
 \$ \_\_\_\_\_ . (Initial investments must be at least \$50.00, but cannot exceed \$100,000.00)
3. Account Registration - Type of Account (Please check one box and provide all requested information.)
- Individual or Joint:** Joint accounts will be presumed to be joint tenants with rights of survivorship and not tenants in common, unless tenants in common, tenants by the entireties, or community property registrations are requested. Only one Social Security Number or Tax Identification Number is required for tax reporting.
- | Owner's First Name | M.I. | Last Name | Owner's Social Security Number or Tax Identification Number | Joint Owner's First Name | M.I. | Last Name |
|--------------------|------|-----------|---|--------------------------|------|-----------|
|                    |      |           |   |                          |      |           |
- Custodial:** A minor is the beneficial owner of the account with an adult custodian managing the account until the minor reaches the age of majority, as specified in the Uniform Gifts/Transfers to Minors Act in the minor's state of residence.
- | Custodian's First Name | M.I. | Last Name | Minor's First Name | M.I. | Last Name | Minor's Social Security Number | Minor's State of Residence |
|------------------------|------|-----------|--------------------|------|-----------|--------------------------------|----------------------------|
|                        |      |           |                    |      |           |                                |                            |
- Trust:** Account is established in accordance with provisions of a trust agreement.
- | Trustee Name(s) | Name of Trust | Trust Date | Trust Tax Identification Number |
|-----------------|---------------|------------|---------------------------------|
|                 |               |            |                                 |
- Corporation, Partnership, or Other Entity:**
- | Business Name | Tax Identification Number |
|---------------|---------------------------|
|               |                           |
4. Account Address \_\_\_\_\_  
 Street City State Zip Code  
 (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
 Daytime Phone Evening Phone

