



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

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



Direct Share Purchase and Sale Program

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.

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

SECTION III - ACCOUNT CERTIFICATION

1. Substitute Form W-9 (Required for a U.S. person including a resident alien.)

Exemption from FATCA reporting code (if any) is **NOT APPLICABLE**. Applies to accounts maintained outside the U.S.

Under penalties of perjury, I certify that:

1. The number shown in Section II is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding.
3. I am a U.S. person (including a U.S. resident alien).
4. The FATCA code entered on this form (if any) is correct and indicates that I am exempt from FATCA reporting.

Certification Instructions – You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because of underreporting interest or dividends on your tax return. For a joint account, only the person whose Tax Identification Number is shown in Section II should sign.

Taxpayer Signature _____ Date _____

SECTION IV - ACCOUNT ELECTIONS - PLEASE PRINT

1. Dividend Reinvestment Election

You may choose to reinvest all or a portion of the cash dividends paid on Kellogg Company Common Stock. Please check one box below to indicate your reinvestment election. (If you do not check a box, you will be deemed to have selected the "Fully Reinvest" option.)

- Reinvest the dividends on ALL shares.**
- I would like a portion of my dividends reinvested.** Please remit to me the dividends on _____ shares. I understand that the dividends on my remaining shares, as well as all future shares that I acquire, will be reinvested.
- All cash – Do not reinvest my dividends.** (Your dividend check will be automatically mailed to your address of record UNLESS you check the box below.)
- I/we hereby authorize Broadridge Corporate Issuer Solutions, Inc. to have my/our dividends deposited automatically in my/our checking/savings account pursuant to the terms of the applicable plan. (Please include a voided check)

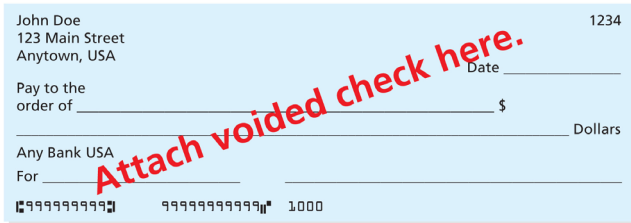
2. Authorization for Monthly Investments – Optional – Include a voided check

- I/we hereby authorize Broadridge Corporate Issuer Solutions, Inc. to make monthly automatic withdrawals from my/our checking/savings account in the amount indicated below to invest in shares of Kellogg Company pursuant to the terms of the applicable plan. (Please include a voided check)

Automatic Monthly Investment Amount (Please see Prospectus for min./max. draft amount) \$ _____

- 3. Banking Information for Monthly Investments and/or Direct Deposit Authorization.** Type of Account: Checking Savings

Name on Account _____



To be completed by your financial organization only if a voided check cannot be supplied or your account is with a credit union or savings & loan.

Name of Financial Organization _____

Bank Routing Number _____

Bank Account Number _____

Authorized Signature of Financial Organization _____ Date _____

SECTION V - SIGNATURES

SIGNATURES - The signatures below indicate that I/we have read the Kellogg Company Direct Stock Purchase and Dividend Reinvestment Plan Prospectus and agree to its terms. By signing below, I/we agree to the indicated account election changes referenced above. (Both signatures required for Joint Tenant accounts.)

Signature(s) Date Signature(s) Date

NEW HOLDER/RECIPIENT TAX PAYER ID CERTIFICATION (SUBSTITUTE W-9)

If a new custodial account is being created, provide the minor's TIN and have the custodian sign the form. For joint tenant accounts, provide the primary account holder's TIN (the primary account holder is the first joint tenant listed on the account). If requested information is not known at time of transfer, or the new owner is not available to sign, an IRS Form W-9 will be mailed to the new shareholder(s) once the shares are transferred. A new shareholder may also go online at shareholder.broadridge.com to print an IRS Form W-9. If the new holder/recipient is not a U.S. person (including a U.S. resident alien), please complete the applicable IRS Form W-8.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <i>(Applies to accounts maintained outside the U.S.)</i>
5 Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
				-			-		
or									
Employer identification number									
				-					

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person ▶	Date ▶
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