

Southwest Iowa Renewable Energy, LLC
Proxy Solicited on Behalf of the Board of Directors
for Annual Meeting of Members
February 15, 2019

The undersigned hereby appoints Karol D. King and Theodore V. Bauer and each of them, with full power of substitution, and hereby authorizes them to represent the undersigned and to vote all of the units of SOUTHWEST IOWA RENEWABLE ENERGY, LLC (the "Company") held of record by the undersigned on December 17, 2018, at the Annual Meeting of Members of the Company to be held on February 15, 2019 and any adjournment(s) thereof (the "2019 Annual Meeting").

The proxy when properly executed will be voted as directed by the undersigned member. If no direction is made, this proxy will be voted "**FOR**" the Series A Director nominee and "**FOR**" proposal 2. The proxies, in their discretion, are further authorized to vote on other matters which may properly come before the 2019 Annual Meeting and any adjournments or postponements thereof.

(continued, and to be signed on reverse side)

Address Change/Comments (Mark the corresponding box on the reverse side)

--

1. Elect one Series A Director to serve until the 2023 Annual Meeting of Members or until his successor shall be elected and qualified.

Director Nominee:	FOR Nominee	WITHHOLD Authority For Nominee
01 Michael K. Guttau	<input type="checkbox"/>	<input type="checkbox"/>

2. Conduct an advisory vote on executive compensation.	FOR	AGAINST	ABSTAIN
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: If other matters properly come before the meeting or any adjournment or postponement thereof, it is intended that units represented by proxies will be voted in the discretion of the proxy holders.

THE BOARD OF DIRECTORS RECOMMENDS A VOTE “FOR” THE SERIES A DIRECTOR NOMINEE AND “FOR” PROPOSAL 2.

PLEASE SIGN, DATE AND RETURN THIS PROXY as soon as possible to Southwest Iowa Renewable Energy, LLC, 10868 189th Street, Council Bluffs, Iowa 51503.

Signature _____	*Signature _____	Date _____
Title _____	Title _____	
Print Name _____ (PLEASE PRINT YOUR NAME CLEARLY)	Print Name _____ (PLEASE PRINT YOUR NAME CLEARLY)	

Address of Unit Holder:	Address of Unit Holder:
City, State, Zip	City, State, Zip

Please sign your name exactly as it appears on the unit certificate. If signing for estates, trusts, corporations or partnerships, title or capacity should be stated. *If units are held jointly, each holder should sign.
