

Computershare

Computershare PO Box 505013

Name(s) of Current Investor(s)	Within USA, US territories & Canada: 855-377-0510 Outside USA, US territories & Canada: 781-575-2428 www.computershare.com/inventrustproperties
Address	
City, State, Zip	
	Current Computershare Account Number
	C
Application for Transfer for Required Minimum I	Distributions (RMD) PLEASE PRINT CLEARLY
1. CURRENT INVESTOR INFORMATION Daytime Telephone Number of Requestor Social Security Number (SSN) or Employer Identification Number (Identification Number (I	
3. CURRENT CUSTODIAN'S SIGNATURE This section <u>must be completed properly</u> for your transfer to be executinstructions for section 3. The undersigned does (do) hereby irrevocably constitute and appoint attorney to transfer the said stock, as the case may be, on the books of	(Notary Seal Is <u>Not</u> Acceptable) pint Computershare as
power of substitution in the premises. Important: The signature(s) below on this Transfer Request must mame(s) as shown on the stock certificate or Computershare-issued s change whatsoever. The below must be signed by the current custodia the guarantor institution to ensure the signer(s) is/are the appropriate p account.	match exactly with the statement, without any an. It is the obligation of
Signature(s) must be stamped with an appropriate Medallion Signature box provided.	re Guarantee in the
Signature of Current Custodian / Broker Title of Signer	Date (mm / dd / yyyy)

4. 1	NEW INVESTOR INFORMATION								
	Individual (complete A, B, C, H, I & J)		Estate (complete A, B, C, E, H	H, I & J and Provi	de Estate EIN	I on Form V	V-9)		
	Joint (complete A, B, C, D, H, I & J)		Trust (complete A, B, C, D, F,	, G, H, I & J)					
	Transfer on Death ("TOD") (complete A, B, C, D, H, I & J)		Other (complete A, B, C, D, F	H, I & J)					
NEW	INVESTOR INFORMATION								
Α	New Investor's Existing Computershare Account Number (if applicable and	known)	Social Security No	umber (SSN) or E	mployer Iden	tification Nu		IN) ot use hyp	ohens)
							SSN	EI	N
	Name (First, MI, Last) - Individual / Entity / Trustee / Executor / Other						(chec	k one box	above)
C									
	Date of Birth (of investor entered in item C above) (mm / dd / yyyy)								
D									
	Name (First, MI, Last) - Joint Investor / Co-Trustee / TOD Beneficiary / Oth	er (if appl	icable)						
Е									
	Date of Birth (of investor entered in item E above) (mm / dd / yyyy)								
F									
	Estate Representative Legal Capacity (if applicable)								
G	Executor Administrator		Personal Rep		Cons	ervator			Other
	Trust / Estate Name (if applicable)	'							
Н									
	Trust / Estate Name - continued			Date of Trust (nm / dd / yyy	y) (if applica	able)		
					/	/			
	Street Address / PO Box						Apt. /	Unit Numb	er
J								I	
	City			Sta	te	Zip Cod	le		
K									
_	Telephone Number								
L									

5. NEW INVESTOR'S FINANCIAL ADVISOR INFORMATION

FINANCIAL ADVISOR INFORMATION

This section must include information for both the Financial Advisor and the Financial Advisor's Institution in order to add a Financial Advisor to the new account. Please note, you must sign in the "NEW BENEFICIAL / UNDERLYING INVESTOR'S SIGNATURE" section below in order to grant consent for your Financial Advisor and your Financial Advisor's Institution to have view-only access to all account information. If this section is left blank, no Financial Advisor will be added to the account.

Name		
CRD Number Assigned by FINRA	Telephone Number (do not use hyphens)	Ext.
3	C	
E-mail Address		
NANCIAL ADVISOR'S INSTITUTION INFOR	MATION	
Financial Institution Name		
CRD Number Assigned by FINRA	Telephone Number (do not use hyphens)	Ext.
	G	
Street Address / PO Box		Apt. / Unit Number
City		State Zip Code
-		
EW BENEFICIAL / UNDERLYING INVESTOR	NC CICNATURE	
	o Computershare to grant view-only access of all account information to the Financial	Advisor and the Financial Advisor's Institution if provide
	ce until the new investor notifies Computershare to revoke such consent.	, tarios, and the i mandar/tarios o modulion is provide
Signature of Ne	ew Beneficial / Underlying Investor Date (mm	/ dd / yyyy)
		/ / /



6.	DISTRIBUTION ELECTION
Α	Select the payment method in which cash distributions are to be sent (choose only one):
	Electronic Deposit (ACH - complete B through F below) Broker or Third Party Payment (complete B through E below)
	Mail Check to Address of Record
В	Name of Payee (Bank, Brokerage Firm or Individual)*
С	L Distribution Mailing Address Apt. / Unit Number
U	
D	City State Zip Code
Е	Account Number – account numbers vary in length and must not include check numbers. F Bank Routing Number – this is a nine-digit number.
	Checking Savings Account Account
SIG	* If cash distribution is sent to an individual other than the registered owner, a Medallion Guarantee Stamp is required in the box below.
	nature 1 Date
	Medallion Guarantee Stamp Current Investor(s) or Legal Rep(s) or Custodian (Notary Seal Is Not Acceptable)
Sig	nature 2 Date
Day	rtime Telephone Number

_	_
	т

	Name(s)					
	Address					
	City, State, Zip					
	k. Print in ters inside the grey own in this example.	A B C 1 2 3	X			
Form V	V-9 Request fo	or Taxpayer Ider	ntification Nur	nber and Certif	ication	
If this Form	n W-9 is not complete	d and returned your acco	ount may be subject to	n hackun withholding a	t the annlicable tax r	ate on all dividends and sale proceeds.
	_	IN provided must belong		_	• •	ate on an dividends and sale proceeds.
,	,	p			p	
Enter your	TIN for the above registentities, it is your Employ	ion Number (TIN) ered name and address in the er Identification Number (El	N). COMPLETE ONLY C	individuals, this is your S NE BOX. Employer Identification Num		(SSN).
Coolal Good	ny rambol			imployer identified for real		
			OR			
B Fed	eral Tax Classific	cation	'			
		ck only ONE of the following b	ooxes:			Limited Liability Company or Other Classification
Pro Me	lividual/Sole oprietor or Single- ember LLC	C Corporation	S Corporation	Partnership	Trust/ Estate	If you are an LLC or Other Classification, do not complete this form. You must complete an IRS Form W-9. This form can be found on the IRS website at www.irs.gov. See "Limited Liability"
	te: For a single-member LL mpt Payee Code	C that is disregarded, check th	e appropriate box above for	or the tax classification of the	e single-member owner.	Company or Other Classification" on the back of this form for more information.
O LAC	If you are exempt	from backup withholding, ente e codes on the back of this for	•	any code that may apply to	you.	Exemption from FATCA reporting code (if any) Not Applicable (Applies to accounts maintained outside the U.S.)
D Cerl	ification					
Under penal	ties of perjury, I certify tha	it: my correct Taxpayer Identifica	ation Number, and			
		ding because: (a) I am exemp a failure to report all interest or				enue Service (IRS) that I am subject to up withholding, and
4. The FAT	CA code(s) entered on this	erson (defined on reverse). s form (if any) indicating that I cross out item 2 above if you				olding because you have failed to report
	and dividends on your tax	return. d for us to accept as proper	certification.			
Sign He	•	Person - Please keep signature		/dd/yyyy)	Daytime Telephone Nu	mber
	•			/ /		
Send form t	to Computershare. Do n	not send to the IRS.				

How to complete this form

Backup Withholding

The Internal Revenue Service (IRS) requires us to withhold taxes for the applicable rate of backup withholding for U.S. persons without a W-9 tax certification who are not otherwise exempt. Parties acting as disbursement agents, such as Computershare, must withhold and pay to the IRS the applicable tax rate of such payments under certain conditions. This is called "backup withholding." Payments that may be subject to backup withholding include interest, dividends, broker and barter exchange transactions, and royalties. Supplying us with your correct Taxpayer Identification Number (TIN), and signing this form will generally allow you to receive your payments without being subject to backup withholding. Failure to supply your TIN, or supplying us with an incorrect TIN, could result in a \$50.00 penalty being assessed by the IRS.

Receipt of a completed Form W-9 will discontinue backup withholding unless otherwise required.

What Name and Number To Give the Requester

	For this type of account:	Give name and SSN of:
1.	Individual	The individual
2.	Two or more individuals (joint account)	The actual owner of the account or, if combined funds, the first individual on the account
3.	Custodian account of a minor (Uniform Gift to Minors Act)	The minor
4.	a. The usual revocable savings trust (grantor is also trustee)	The grantor-trustee
	b. So-called trust account that is not a legal or valid trust under state law	The actual owner
5.	Sole proprietorship or disregarded entity owned by an individual	The owner
6.	Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulation section 1.671-4(b)(2)(i)(A))	The grantor
	For this type of account:	Give name and EIN of:
7.	Disregarded entity not owned by an individual	The owner
8.	A valid trust, estate, or pension trust	Legal entity
9.	Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
Association, club, religious, charitable, educational, or other tax- exempt organization		The organization
11.	Partnership or multi-member LLC	The partnership
12	. A broker or registered nominee	The broker or nominee
Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments		The public entity
14	Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulation section 1.671-4(b)(2)(i)(B))	The trust

Exempt payee code. Generally, individuals (including sole proprietors) are not exempt from backup withholding. Corporations are exempt from backup withholding for certain payments, such as interest and dividends. Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.

Note. If you are exempt from backup withholding, you should still complete this form to avoid possible erroneous backup withholding.

The following codes identify payees that are exempt from backup withholding:

- 1 -- An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
- 2 -- The United States or any of its agencies or instrumentalities
- 3 A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- 4 -- A foreign government or any of its political subdivisions, agencies, or instrumentalities
- 5 A corporation
- 6 A dealer in securities or commodities required to register in the United States, the District of Columbia, or a possession of the United States
- 7 A futures commission merchant registered with the Commodity Futures Trading Commission
- 8 A real estate investment trust
- $9\,-\,$ An entity registered at all times during the tax year under the Investment Company Act of 1940
- 10 A common trust fund operated by a bank under section 584(a)
- 11 -- A financial institution
- 12 A middleman known in the investment community as a nominee or custodian
- 13 A trust exempt from tax under section 664 or described in section 4947

Limited Liability Company or Other Classification

If you are a Limited Liability Company or Other entity, complete an IRS Form W-9 found on the IRS website www.irs.gov. Be sure to include the information required in the IRS instructions for a Limited Liability Company (LLC) or for Other entities on page 2. Return the completed form to the address below.

Definition of a U.S. Person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States,
- An estate (other than a foreign estate), or
- A domestic trust (as defined in Regulations Section 301.7701-7).

Exemption from FATCA reporting: If you are submitting this form for an account that is maintained in the United States, you are exempt from FATCA reporting.