

INCOME DISTRIBUTION REQUEST FORM

Cottonwood Residential

Please Print or Type IMPORTANT INFORMATION:

Each alternative investment has specific rules around income distributions, please review the terms and conditions outlined within the specific product prospectus for details.

This form is not for withdrawal requests.

Forward To: First Trust Retirement, c/o DST Systems, Inc.

Regular MailOvernight DeliveryPO Box 219065Mail Stop: CottonwoodKansas City, MO 64121-9065430 West 7th Street

855-387-3847 Kansas City, MO 64105-1407

ep 1: IRA OWNER INFORMATION					
Name	Social Security Number	Date of Birth	Accou	int Number (If known)	
				,	
Street Address	City	State	Zip	Phone Number	
50. CCC / 100. CSC	3.0,	State	- .P	. Heric Hamsel	
ep 2: INCOME DISTRIBUTION INSTRUCTIONS*					
Product: ☐ Cottonwood Residential REIT*					
Cottonwood Residential RET					
*Income distributions for Cottonwood Residentic	al are processed in accordance with thei	r resnective distril	bution programs	and are subject to availability. Please	
review their prospectuses for frequency and ava				and are subject to availability. Thease	
☐ Please pay out my income distributions. (Select distribution type in step 3 and pa	ayment method i	n Step 4)		
To participate in the Distribution Reinvestment Plan (DRP), it must be indicated on the applicable Subscription Agreement or product sponsor update form. ep 3: INCOME DISTRIBUTION REPORTING					
•	OOTU GCED IDA Gulanizad ID	•			
	ROTH SEP IRA Inherited IR er must be under age 59 1/2 - IRS penal:		ollover occurs w	vithin 60 days)	
 □ Premature Distribution (Account holder must be under age 59 1/2 - IRS penalty applies unless rollover occurs within 60 days) □ Premature Exempt Distribution (Including Permanent Disability, SEPP, and other identified 72 (t) qualified exceptions. Documentary evidence is required.) 					
☐ Normal Distribution (Account holder a	age 59 1/2 or over; includes Required M	linimum Distribut	ions)		
☐ Death (If not already in a Beneficiary					
custodian OR must include the custo	,	stee transfer, this	form must be s	igned and Signature Guaranteed by accepting	
ep 4: PAYMENT INSTRUCTIONS					
☐ Mail check to the address currently on file.					
☐ Electronically deposit by ACH to my bank. (A voided check is required.)					
Deposit into my Undirected Cash Account. (This is not a taxable distribution.)					
☐ Mail check to a third party listed below. (This will be coded as a taxable distribution.)					
☐ Transfer my income distributions to the custodian listed below as a Trustee to Trustee					
transfer. (This will be coded as a non-taxable					
For a Trustee to Trustee transfer, this form					
Guaranteed by accepting custodian OR mu					
signed Letter of Acceptance. This custodial time of distribution establishment. Please					
notarized.	note that this form calmot be				
			S	ignature Guarantee	
Payee or Account Name		Acco	unt Number		
•					
					
Address					
Accepting Custodian Sign off				_	



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Step 5: INCOME TAX WITHHOLDING (THIS SECTION MUST BE COMPLETED*) (Form W-4P/OMB No .1545-0415)

* Except for a distribution from a Roth IRA or for a return of excess contribution.

In compliance with the "Tax Equity and Fiscal Responsibility Act," First Trust Retirement, as custodian, is required to withhold Federal Income Tax from all IRA distributions. You may exercise your right to elect not to have funds withheld. This election will be in effect until you change it. You may change or revoke this election at any time and as often as you wish. You may elect out of this withholding by checking the appropriate box below. If no election is made, First Trust Retirement is required to withhold 10% Federal Income Tax. State Income Taxes cannot be withheld from your distribution. Please note that penalties may be incurred under the estimated tax rules if your withholding and/or estimated tax payments are not sufficient.

estimated tax rules if your withholding and/or estimated tax payments are not sufficient.	
Please note that withholding cannot be done for Transfers-in-Kind or Transfers to Non-Qu	ualified accounts.
□ Do not withhold taxes.□ Withhold% from the amount withdrawn (must be at least 10%).	
itep 6: SIGNATURE	
By signing below, I certify that the information I have provided is true and correct, and I aut	thorize the Custodian to distribute my IRA as instructed above.
IRA Owner's Signature (or other authorized person)	Date