

## INCOME DISTRIBUTION REQUEST

## **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.

<u>Regular Mail</u> PO Box 219169

Kansas City, MO 64121-9169 855-387-3847 <u>Overnight Delivery</u> Mail Stop: Resource Real estate 430 West 7th Street

Kansas City, MO 64105-1407

Name Social Security Number D	Date of Birth		
Name Social Security Number D	ate of Rirth		
	ate of birti	Account	Number (If known)
Street Address City Si	tate	Zip	Phone Number
p 2: INCOME DISTRIBUTION INSTRUCTIONS*			
Product:			
<ul> <li>□ Resource Real Estate Opportunity REIT, Inc.*</li> <li>□ Resource Real Estate Opportunity REIT, Inc.*</li> <li>□ Resource Innovation Office In</li></ul>		.* □ Resou	rce Real Estate Diversified Income Fund*
*Income distributions for Resource Real Estate are processed in accordance with their respreview their prospectuses for frequency and availability details or call Resource Real Estate			re subject to availability. Please
☐ Please pay out my income distributions. (Select distribution type in step 3 and payr	ment method in	Step 4)	
To participate in the Distribution Reinvestment Plan (DRP), it must be indicated on the a	annlicable Subsc	rintion Agreemen	t or product sponsor undate form
p 3: INCOME DISTRIBUTION REPORTING	ipplicable oabse	inpuloti rigi cemen	to product sponsor apadet form
<ul> <li>□ Early Distribution (Account holder must be under age 59 1/2- IRS penalty applie</li> <li>□ Normal Distribution (Account holder age 59 1/2 or over; includes Required Mir</li> <li>□ Permanent Disability (Account holder meets disability qualifications under Sect</li> <li>□ Death (Income distributions must be distributed from an Inherited IRA.)</li> <li>□ IRA Trustee to Trustee Custodial Transfer (Non-Taxable). For a Trustee to Trust</li> </ul>	nimum Distribution 72(m)(7) of	i <b>ions)</b> IRS Code, documei	ntary proof may be required.)
custodian OR must include the custodian's signed Letter of Acceptance.			
☐ 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	9		
transfer. (This will be coded as a non-taxable distribution.)  For a Trustee to Trustee transfer, this form must be signed and Signature Guaranteed by accepting custodian OR must include the custodian's signed Letter of Acceptance. This custodial sign off is only required at time of distribution establishment. Please note that this form cannot be notarized.			
		Sign	nature Guarantee
	<u> </u>		
Payee or Account Name	Accou	nt Number	
Address			
Accepting Custodian Sign off			





## 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

required to withhold a estimated tax rules if y	10% Federal Income Tax. State Income Taxes cannot be rour withholding and/or estimated tax payments are not	rchecking the appropriate box below. If <b>no election is made, First Trust F</b> <b>e withheld from your distribution.</b> Please note that penalties may be incu it sufficient. <b>Please note that withholding cannot be done for Transfers-</b> i	rred under the
Transfers to Non-Qua			
☐ Do not withhol			
□ Withhold	% from the amount withdrawn (must be at least 10%)	).	
p 6: SIGNATURE			
By signing below, I cer	tify that the information I have provided is true and core	rect, and I authorize the Custodian to distribute my IRA as instructed abo	ve.