



®

PUBLIC FUND APPLICATION FOR TRANSFER REQUIRED MINIMUM DISTRIBUTION (RMD)**This form is ONLY used for Inland Income Trust, InPoint Commercial, and IPC Alternative REIT**

Please indicate the Investment Fund name and account number for which the change is requested ("the Company"):

Name of the Investment Fund *(Required)*Account number of the Investment Fund *(Required)***A - CURRENT ACCOUNT INFORMATION - To be completed by current Custodian.** Please print exactly as it appears on the account.

Name _____

Address _____

City _____ State _____ Zip _____

Social Security/Tax ID # _____

Inland Account # _____

☐

All

or

of Shares to be Transferred _____

B - CURRENT CUSTODIAN SIGNATURE - *(Required)*

Signature of Custodian _____

Date _____

Title of Signer _____

Date _____

Medallion Signature Guarantee or
Official Stamp of Custodian *(Required)***C - NEW ACCOUNT INFORMATION - To be completed by new investor(s).** Check one box and provide all requested information.Transfer to Existing Non-Qualified Account ☐

Account # _____

Type of Ownership - Please mark one selection only.

☐

Individual

☐

JTWROS

☐

Trust

☐

Other _____

Investor/Trustee - First Name and Last Name _____

Date of Birth - MM/DD/YYYY _____

Co-Investor/Trustee - First Name and Last Name _____

Date of Birth - MM/DD/YYYY _____

If Trust/Pension/PSP or Other, Please Provide Complete Title _____

Date of Trust/Pension/PSP/Other _____

Residence Address - No P.O. Boxes - Required by Law _____

Trust Tax ID _____

City _____ State _____ Zip _____

Alternate Mailing Address - P.O. Boxes are Acceptable _____

City _____ State _____ Zip _____

Home Telephone _____ Business Telephone _____

D - BROKER DEALER (BD), REGISTERED REPRESENTATIVE (RR), OR INVESTMENT ADVISOR REPRESENTATIVE (IAR) - Complete entire section.

RR/IAR Name(s) _____

Mailing Address _____

City _____ State _____ Zip _____

Telephone Number _____ E-mail Address _____

BD or RIA Firm Name _____

Rep ID # *(Required)* _____ Branch ID # *(Required)* _____

Client Account # _____ IAR CRD # _____

E - DISTRIBUTION OPTIONS - To be signed and completed by new investor(s) / custodian. Please mark one selection only. **If a distribution option is not selected, cash distributions will be sent to the address of record.**

☐ Mail funds to Residence Address / Custodian *(For Custodial held positions all funds will be sent directly to the Custodian of record)*

☐ Send Distribution to a Third Party or via ACH:

☐ Via Mail (Complete 2 - 5 below)

☐ Via Electronic Deposit (ACH) (Complete 1 - 6 below. A voided check/deposit slip must be submitted or your request will not be processed)

Please check type of account: ☐ Checking *(Attach a pre-printed VOIDED check)* ☐ Savings *(Attach a VOIDED deposit slip)*

1. Name of Bank, Brokerage Firm: _____

2. Name of Individual on Bank, Brokerage Firm Account * _____

3. Distribution Mailing Address _____

4. City _____ State _____ Zip _____

5. Account # *(If applicable)* _____ 6. Bank Routing # *(For ACH Only)* _____

** If cash distribution is sent to an individual other than the registered owner or custodian of record, the investor's signature(s) must be medallion guaranteed.*

I authorize the Company or its agent(s) to deposit my distribution to my checking or savings account. This authority will remain in force until I notify the Company in writing to cancel it. In the event the Company or its agent(s) deposit funds erroneously into my account, they are authorized to debit my account for an amount not to exceed the amount of the erroneous deposit.

Signature - Investor / Custodian Date

Signature - Co-Investor Date

Medallion Signature Guarantee or
Official Stamp of Custodian *(See asterisk above)*

1. SUBSTITUTE FORM W-9 - Must be signed and completed by party under which tax information is to be reported or taxes will be withheld from distributions. Tax information may only be reported under one tax ID or Social Security number.

THE UNDERSIGNED CERTIFIES, under penalties of perjury, (i) that the taxpayer identification number shown below is true, correct and complete, (ii) that I am (we are) not subject to backup withholding either because I (we) have not been notified that I am (we are) subject to backup withholding as a result of a failure to report all interest or distributions, or the Internal Revenue Service has notified me (us) that I am (we are) no longer subject to backup withholding, (iii) I am a U.S. citizen or other U.S. person (as defined in the instructions) and (iv) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

See Form W-9 instructions at <http://www.irs.gov>

Social Security/Tax ID # _____

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

2. THE UNDERSIGNED HEREBY REPRESENTS AND WARRANTS TO THE COMPANY AS FOLLOWS:

A. The undersigned hereby acknowledges that the Company's annual reports on Form 10-K and quarterly reports on Form 10-Q are or will be available at www.sec.gov.

B. The undersigned has (i) a net worth (excluding home, home furnishings and automobiles) of at least \$70,000 and (without regard to investment in the Company) has gross income due in the current year of at least \$70,000; or (ii) a net worth (excluding home, home furnishings and automobiles) of at least \$250,000. In addition to the foregoing general suitability standards, the undersigned meets the higher suitability requirements imposed by its state of primary residence as set forth in the latest final Prospectus of the Company, as supplemented (the "Prospectus") under "Suitability Standards."

C. The undersigned is acquiring the shares for his or her own account; or if the undersigned is acquiring the shares on behalf of a trust or other entity of which the undersigned is the trustee or authorized agent, the undersigned has due authority to execute this form and does hereby legally bind the trust or other entity of which the undersigned is the trustee or authorized agent.

D. The undersigned acknowledges that the shares are not liquid, there is no current market for the shares and that it may not be able to sell the shares.

E. The undersigned understands that the assignability and transferability of the shares will be governed by the articles of incorporation of the Company, the bylaws of the Company and all applicable laws as described in the Prospectus, and the undersigned has adequate means of providing for his or her current needs and personal contingencies and has no need for liquidity in this investment.

F. The undersigned understands that the shares are subject to transfer restrictions that prevent any future transferee from acquiring any shares that would cause such future transferee to own, directly or indirectly, either: (a) in excess of 9.8% of the Company's outstanding common stock; or (b) a number of shares that would cause 50% or more of the Company's outstanding common stock to be held by five or fewer individuals.

G. The undersigned has reached the age of majority in his or her state of residence and is experienced in real estate investment and business matters.

H. The undersigned understands that (a) the undersigned will not be admitted as a stockholder until a transfer has been accepted and (b) the acceptance process includes, but is not limited to, reviewing this form for completeness and signatures.

I. The undersigned understands the meaning and legal consequences of the representations and warranties set forth above, and it agrees to indemnify and hold harmless the Company from and against any and all loss, damage, claim, expense or liability (including, without limitation, court costs and attorney's fees and expenses) due to, or arising out of, a breach of representation, warranty, acknowledgment, covenant, or agreement of the undersigned contained in this form. Notwithstanding any of the representations, warranties, acknowledgments, covenants, or agreements made herein by the undersigned, the under-signed does not thereby or in any other manner waive any rights granted to him or her under federal or state securities law.

Signature Stockholder

Date

Signature Co-Stockholder

Date

MAIL COMPLETED FORM TO:

Regular Mail:

Inland
c/o SS&C GIDS, Inc.
P.O. Box 219182
Kansas City, MO 64121-9182

Overnight Delivery:

Inland
c/o SS&C GIDS, Inc.
801 Pennsylvania Avenue
Kansas City, MO 64105-1307

Questions:

Inland Investor Services
866-My-Inland (866-694-6526)