Inland Real Estate Investment Corporation

Please indicate the fund for which the change is requested ("the Company"):

APPLICATION FOR TRANSFER FOR REQUIRED MINIMUM DISTRIBUTIONS (RMD)



The Inland name and logo are registered

Inland Real Estate Income Trust,	Inc. InPoint Con	nmercial Rea	I Estate Incon	ne, Inc.			trademarks being used under neerise.
A - CURRENT ACCOUNT INFORMATIO	N - To be completed by	current own	er. Please prin	t exactly as	it appears o	n the ac	count.
Name							
Address							
City				State		Zip _	
•							
Social Security/Tax ID #	Inland Accoun	nt #		[All	or	# of Shares to be Transferred
B - CURRENT CUSTODIAN SIGNATURI	E - (Required)						
							Signature Guarantee or np of Custodian (Required)
Signature of Custodian		Date					
Title of Signer		Date		_			
C - NEW ACCOUNT INFORMATION - To	be completed by new	owner. Chec	k one box and	provide all	requested in	formatio	on.
Transfer to Existing Non-Qualified Acco	ount	Accour	nt #			_	
Type of Ownership - Please mark one se	election only.	Individual	JTWR	os 🔲 1	[rust	Othe	er
Stockholder/Trustee - First Name and La	ast Name						Date of Birth - MM/DD/YYYY
Co-Stockholder/Trustee - First Name an	d Last Name					_	Date of Birth - MM/DD/YYYY
If Trust/Pension/PSP or Other, Please P	Provide Complete Title					_	Date of Trust/Pension/PSP/Other
Residence Address - No P.O. Boxes - Re	equired by Law					_	Trust Tax ID
City				State		Zip	
Alternate Mailing Address - P.O. Boxes							
City				State		Zip	
Home Telephone			Business	s Telephon	e		

D - BROKER DEALER (BD), REGISTERED REPRESEN	ITATIVE (RR), OR INVESTMENT AI	VISOR REP	PRESENTATIVE (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 # (Re	quired)		
Client Account #	IAR CRD #			
E - DISTRIBUTION OPTIONS - To be signed and comp	leted by new owner(s). Please mark	one selection	n only. If a distribution option is not selected, cash	_
Mail Check to Residence Address: Distribution Reinvestment Plan: (Only available and Reinvestment Plan ("DRP") described in the Prospon on the account. Removal of the broker dealer will recommend by the Bend Distribution to a Third Party or via ACH: (Only available and the Prospon on the account. Removal of the broker dealer will recommend by the Bend Distribution to a Third Party or via ACH: (Only available and the Prospon on the account Deposit (ACH) (complete #1 the Please check type of account Deposit (ACH) (complete #1 the Please check type of account Deposit (ACH) (Complete #1 the Please chec	ectus and reinvest the entire cash discesult in automatic termination in the complete #1 through #4 below) arough #5 below and attach a voider ing Savings	stribution. En DRP. <u>d check</u>)	nrollment in the DRP requires a broker dealer be current	
3. City			Zip	
4. Account # (if applicable) A voided check must be submitted for distributions via 5. Bank Routing # (For ACH Only)	ACH or your request will not be proc	essed.	Medallion Signature Guarantee or Official Stamp of Custodian <i>(Required)</i>	
Signature Stockholder	Date		All signatures must be medallion signature guaranteed	
Signature Co-Stockholder	Date		cash distribution is sent to an individual other than the registere ner, the stockholder's signature(s) must be medallion guarantee	

IREIC RMD TA Page 2 of 3

1. SUBSTITUTE FORM W-9 - Must be signed and Tax information may only be reported under one tax		tion is to be reported or taxes will be withhe	eld from distributions.
THE UNDERSIGNED CERTIFIES, under penalties of (we are) not subject to backup withholding either bed to report all interest or distributions, or the Internal Re U.S. citizen or other U.S. person (as defined in the in reporting is correct.	ause I (we) have not been notified that I am evenue Service has notified me (us) that I ar	(we are) subject to backup withholding as a n (we are) no longer subject to backup with	result of a failure holding, (iii) I am a
See Form W-9 instructions at http://www.irs.gov		Social Security/Tax ID#	
Exempt payee code (if any)	Exemption from FATO	CA reporting code (if any)	
2. THE UNDERSIGNED HEREBY REPRESENTS A	ND WARRANTS TO THE COMPANY AS F	OLLOWS:	
The undersigned hereby acknowledges th www.sec.gov.	at the Company's annual reports on Form 10	0-K and quarterly reports on Form 10-Q are	or will be available at
2. The undersigned has (i) a net worth (exclute Company) has gross income due in the current y \$250,000. In addition to the foregoing general suitabresidence as set forth in the latest final Prospectus of	ility standards, the undersigned meets the h	xcluding home, home furnishings and autor igher suitability requirements imposed by its	nobiles) of at least
3. The undersigned is acquiring the shares for which the undersigned is the trustee or authorized at entity of which the undersigned is the trustee or authorized at the trustee or authorized			
4. The undersigned acknowledges that the s	hares are not liquid, there is no current mark	et for the shares and that it may not be able	e to sell the shares.
5. The undersigned understands that the ass the bylaws of the Company and all applicable laws a needs and personal contingencies and has no need			
6. The undersigned understands that the sha would cause such future transferee to own, directly c shares that would cause 50% or more of the Compa	ores are subject to transfer restrictions that p or indirectly, either: (a) in excess of 9.8% of the ny's outstanding common stock to be held b	he Company's outstanding common stock;	
7. The undersigned has reached the age of r	najority in his or her state of residence and is	s experienced in real estate investment and	business matters.
8. The undersigned understands that (a) the process includes, but is not limited to, reviewing this	undersigned will not be admitted as a stockl form for completeness and signatures.	nolder until a transfer has been accepted an	d (b) the acceptance
9. The undersigned understands the meaning and hold harmless the Company from and against at fees and expenses) due to, or arising out of, a bread this form. Notwithstanding any of the representations signed does not thereby or in any other manner waits	h of representation, warranty, acknowledgen s, warranties, acknowledgments, covenants,	ability (including, without limitation, court co nent, covenant, or agreement of the unders or agreements made herein by the undersi	sts and attorney's igned contained in
Signature Stockholder	Date Signature C	o-Stockholder	Date
orginaturo otoottioidei	Suco Signature 6	o ottomioradi	2410
MAIL COMPLETED FORM TO:			
Regular Mail:	Overnight Delivery:	Questions:	
Inland Real Estate Investment Corporation c/o SS&C GIDS, Inc. P.O. Box 219182 Kansas City, Missouri 64121-9182	Inland Real Estate Investment Corporation c/o SS&C GIDS, Inc. 430 W 7th Street Kansas City, Missouri 64105		

Page 3 of 3

F - NEW OWNER SIGNATURE(S) - To be signed by new registered owner(s).

IREIC RMD TA