

**CURRENT ACCOUNT INFORMATION** (NOTE: PLEASE FILL OUT THIS SECTION IN ITS ENTIRETY AND ANY APPLICABLE SECTIONS.)

Investor Name (as it appears on statement):		
Account Number:	Social Security Number or Tax ID:	
Custodian Name (For Custodial IRA's only):		
Address:		
City:	State:	Zip Code:

**CHANGE OF INTERMEDIARY INFORMATION** (PROVIDE NEW INFORMATION BELOW)

Name of Intermediary and Firm Number:		
Name of Branch Office and Branch Number:		
Representative Name and Rep Number:	Phone Number:	
Intermediary Account Number or Bin:		
Intermediary Address:		
City:	State:	Zip Code:
Intermediary Signature:	Date:	
Print Name:	Phone Number:	
Title (Principal/Home Office):		

**INTERESTED PARTY STATEMENTS** (IF APPLICABLE, CHECK THE BOX THAT APPLIES)

Add	Remove	Change
Name:		
Address:		
City:	State:	Zip Code:

**CHANGE OF ADDRESS** (PROVIDE NEW INFORMATION BELOW)

Name:		
Address:		
City:	State:	Zip Code:
Phone Number:		

## NAME CHANGE

Applicable legal documentation showing your name change, such as a marriage certificate or change of name affidavit, is required with this form.

Former Name:

New Name:

Former Signature:

New Signature:

## ELECTRONIC DELIVERY (PROVIDE NEW EMAIL ADDRESS BELOW)

Email address on file will continue to receive electronic delivery where available unless instructed below.

Add Email:

Remove Email:

Instead of receiving paper copies of the prospectus, prospectus supplements, annual reports, proxy statements, and other stockholder communications and reports, you may elect to receive electronic delivery of stockholder communications from JLL Exchange TRS, LLC and JLLIPT Holdings LP. If you would like to consent to electronic delivery, including pursuant to email, please check the box below for this election. We encourage you to reduce printing and mailing costs and to conserve natural resources by electing to receive electronic delivery of stockholder communications and statement notifications. By consenting below to electronically receive stockholder communications, including your account-specific information, you authorize said offering(s) to either (i) email stockholder communications to you directly or (ii) make them available on our website and notify you by email when and where such documents are available. You will not receive paper copies of these electronic materials unless specifically requested, the delivery of electronic materials is prohibited or we, in our sole discretion, elect to send paper copies of the materials. By consenting to electronic access, you will be responsible for your customary internet service provider charges and may be required to download software in connection with access to these materials.

I consent to electronic delivery.

## DISTRIBUTION INFORMATION

Send Distributions **(select one)**:

Check to my mailing address listed on file

Electronically Deposited in my Bank for Brokerage Account below

PLEASE PROVIDE BANK/BROKERAGE ACCOUNT INFORMATION BELOW AND ATTACH A VOIDED CHECK OR DEPOSIT SLIP:

Account Information:

Title on Bank/Brokerage Account:

Name of Bank/Brokerage:

Bank Account Number:

Bank ABA #:

City:

State:

Zip Code:

For further credit:

## SIGNATURE

By signing this form, I authorize JLL Exchange TRS, LLC, JLLIPT Holdings LP, their affiliates and agents to act on any instructions believed to be genuine for any service authorized on this form. I agree that they will not be liable for any resulting loss or expense. All services are subject to conditions set forth in each offering materials (e.g. Prospectus) and organizational documents. All account owners must sign.

I/We agree that the Fund's or any of its subsidiaries, affiliates, officers, directors, trustees, or employees will not be liable for any losses, claim expense, or cost and agree to indemnify the same from any losses and damages for acting upon any instructions or inquiries. This authorization shall continue until JLL Exchange TRS, LLC or JLLIPT Holdings LP, receives notice of modification signed by all amended from time to time. All terms shall be binding upon heirs, representatives and assignees of the account owners. I/We acknowledge that I/We understand past performance is not indicative of future results.

Account Owner's Signature:

Date:

Joint Owner's Signature (if applicable):

Date:

Custodian Authorization (Required for custodial accounts):

PLEASE RETURN TO:  
JLLX Exchange TRS, LLC  
C/O UMB Fund Services  
235 W. Galena Street  
Milwaukee, WI 53212-3948

Or by Email to: [JLLexchangesupport@lasalle.com](mailto:JLLexchangesupport@lasalle.com)

For Assistance, Please Call: (888) 885-8854