## **Account Maintenance Form**



CURRENT ACCOUNT INFORMATION (NOTE: PLEASE FILL OUT	THIS SECTION IN I	TS ENTIRETY AND ANY APPLICA	BLE SECTIONS.)		
Investor Name (as it appears on statement):					
Account #:	Social Security/Ta	∢ID#:			
Custodian Name (For Custodial IRAs only):					
Address:					
City: State:			Zip Code:		
CHANGE OF INTERMEDIARY INFORMATION .					
CHANGE OF INTERMEDIARY INFORMATION (PROVIDE NEW INFORMATION BELOW)  Name of Intermediary and Firm #:					
Name of Branch Office and Branch #:					
Representative Name and Rep #:		Phone #:			
Intermediary Account # or Bin:					
Intermediary Address:					
City:		State:	Zip Code:		
Intermediary Signature:		Date:			
Print Name:		Phone #:			
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 #:					

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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 private placement memorandum (PPM), PPM 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 #:	Bank ABA #:			
City:	State:	Zip Code:		
For Further Credit:				
SIGNATURE				
By signing this form, I/we 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/We 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:		
loint Owner's Signature (if applicable):		Date:		
Custodian Authorization (Required for custodial accounts):				
PLEASE RETURN TO:  JLLX Exchange TRS, LLC				

JLLX Exchange TRS, LLC SS&C GIDS, Inc. 801 Pennsylvania Ave Suite 219107

Kansas City, MO 64105-1307

Or by Email to: Lasalle1031.ai@sscinc.com For Assistance, Please Call: (833) 341-3219

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