

INCOME DISTRIBUTION REQUEST FORM Hines

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 SS&C

Regular Mail Overnight Delivery
PO Box 219010 Mail Stop: Hines
Kansas City, MO 64121-9010 430 West 7th Street
855-387-3847 Kansas City, MO 64105-1407

Sto	p 1: IRA OWNER INFORMATION					
316	P I. INA OWNER INFORMATION					
IRA Owner Name		Social Securit	y Number	Date of Birth	FTR Account Number (If Applicable)	
IRA Owner Name		Social Securit	y Number	Date of Birth	TTA Account Number (II Applicable)	
۸۸۵	dress	City/State/Zip	<u> </u>	Email	Phone Number	
	p 2: PRODUCT SELECTION	City/State/Zip)	Lillali	Filone Number	
	Hines Global Income Trust*		Hines Realty Income Fund	*	Hines Senior Living Opportunity Fund*	
	HMS Income Fund*		Hines Global REIT*		Southside Multifamily LLC*	
	SW Industrial Center LLC*		Residences at the RIM LP*		Tinsley Park LP*	
	Houston Multifamily Portfolio LP*					
	*Income distributions for Hines are processed in accordance with their respective distribution programs and are subject to availability. Please review					
	their prospectuses for frequency and availability details or call Hines at 888-220-6121.					
		t Trust Retirement	to pay out my income dis	tributions. Please select of	distribution type in step 3 and payment method	
Ste	p 4.					
То	participate in the Distribution Reinvestm	ent Plan (DRP), it r	must be indicated on the a	pplicable Subscription Ag	reement or product sponsor update form.	
	p 3: INCOME DISTRIBUTION INSTRUCTIO	NS	_		<u>_</u>	
	Traditional IRA	Roth IRA		SEP IRA	☐ Beneficiary IRA	
	Premature Distribution (Account hold	er must be under a	ge 59 ½ - IRS penalty applie	es unless rollover occurs w	ithin 60 days)	
	<u>Premature Exempt Distribution</u> (Including Permanent Disability, SEPP, and other identified 72 (t) qualified exceptions. (Documentary evidence required)					
	Normal Distribution (Account holder age 59 ½ or over)					
	<u>Death Distribution</u> (If not already in a Beneficiary IRA; Must provide a certified copy of the account holder's Death Certificate)					
	IRA Trustee to Trustee Transfer Please note that if requesting an IRA Trustee transfer you need to contact the accepting custodian and complete their					
	transfer (TOA) paperwork. A Medalli	on Signature Guar	antee stamp may be requi	ired on their transfer form		
	p 4: PAYMENT METHOD xable Options:					
Mail check to the address currently on file (Signature Guarantee required if address changed within 30 days.)					nve)	
		, , ,		J	•	
	Electronically transfer funds by ACH to my bank (Voided check is required for new instructions. Signature Guarantee required if adding bank within					
.	Mail check to a third party listed below.					
Non-Taxable Options:						
	Deposit cash into my Undirected Cash Account					
	Transfer my income distributions to the custodian listed below as a Trustee to Trustee Transfer 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.					
			<u> </u>			
Payee or Account Name						
,	,					
Account Number						
Street Address						
Ci+	v State & 7ID			C:~	nature Guarantee	
CIL	y, State & ZIP			Sig	nature Guarantee	



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Step 5: INCOME TAX WITHHOLDING (THIS SECTION MUST BE COMPLETED*) (Form W-4/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 at any time and as often as you wish. You may elect out of this withholding by checking the appropriate box below. Please note that penalties may be incurred under the estimated tax rules if your withholding and/or estimated tax payments are not sufficient.

If no election is made, First Trust Retirement is required to withhold 10% Federal Income Tax. State Income Taxes cannot be withheld from your distribution.

Do not withhold taxes.

Withhold _______ % from the amount withdrawn (must be at least 10%).

Step 6: SIGNATURE REQUIRED

By signing below, I certify that the information I have provided is true and correct, and I authorize the Custodian to distribute my IRA as instructed above.

IRA Owner Signature(or other authorized person*)

Date

* If signing as Power of Attorney, valid POA documents must be included.