

# Redemption Request

**NOTE:** You should carefully review the complete terms of the share redemption program as described in the offering circular or private placement memorandum, as amended and supplemented, ("Offering Materials") you were previously provided. The redemption of shares, units, or interest is subject to all of the limitations and restrictions contained in Cottonwood's, or any affiliated entities (collectively "Company"), share redemption program, Charter, Bylaws and other Offering Materials as applicable, including compliance with applicable state and federal securities laws. **ALL SIGNATURES MUST BE MEDALLION SIGNATURE GUARANTEED**

The completed Redemption Request form (**ORIGINALS REQUIRED**) must be sent to:

**DST Systems, Inc.**  
**Attn: Cottonwood**  
**430 W. 7<sup>th</sup> Street**  
**Suite #219065**  
**Kansas City, MO 64105**  
**Phone: (844)422-2584**

## REDEMPTION PROCEDURE

- 1. This form must be completed and submitted as instructed above.** Shares/Units/Interest may be presented for redemption to the Company only by the owner(s) of record or, in the case of death or disability, a duly authorized agent or attorney, upon the due execution and completion of this redemption form and such other documents as the Company may require. **ALL SIGNATURES MUST BE MEDALLION SIGNATURE GUARANTEED**
- 2. Company Review and Acceptance.** The Board of Directors will, in its sole discretion, determine whether the requested redemption will be approved by the Company. Redemptions will be processed in accordance with the Offering Materials.

## INVESTOR INFORMATION

Fund/Offer Name: \_\_\_\_\_

Account Registration Name: \_\_\_\_\_

Investor Name(s): \_\_\_\_\_  
*(last/first/middle)*

Email: \_\_\_\_\_ SSN/Tax ID: \_\_\_\_\_

Account Number: \_\_\_\_\_

Financial Advisor/Registered Representative Name(s): \_\_\_\_\_

## SHARES/UNITS/INTEREST TO BE REDEEMED

Full Redemption     Partial Redemption: \_\_\_\_\_  
*(Please indicate the number of Shares/Units/Interest to be redeemed)*



## REDEMPTION TYPE

Please choose one of the following options:

- General Redemption:**  
Redemptions will be made in accordance with the restrictions and requirements outlined in the offering circular or private placement memorandum, as amended and supplemented.
- Redemption as a result of Death or Complete Disability:**  
**\* COPY OF DEATH CERTIFICATE OR PROOF OF DISABILITY DOCUMENTATION MUST BE PROVIDED. TRUST DOCUMENTS, WILL, TESTAMENT, ETC. MUST BE PROVIDED AS APPLICABLE.** Please refer to the offering circular or private placement memorandum, as amended and supplemented, for the specific redemption requirements.

## PAYMENT OPTIONS

Please select one of the payment options below. All payments will be sent regular mail unless otherwise instructed.

- Via check to the address of record (if account is held by a custodian, check will be sent back to the custodian of record).
- Via ACH - Please provide information below if different from ACH used for regular distributions.

Bank, Brokerage Firm or Person: \_\_\_\_\_ Account Type: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Account Number: \_\_\_\_\_ ABA Routing Number: \_\_\_\_\_

**Please attach a voided check or deposit slip of the account where the deposit will be made.**

## CUSTODIAN ACCOUNTS

NOTE: Any redemptions for custodial accounts require a medallion signature guarantee from the custodian of record. The original stamped paperwork must be sent to DST. **Faxed, emailed, or copied medallion signature guarantee stamps will not be accepted.**

Name of Custodian: \_\_\_\_\_ Custodian Phone: \_\_\_\_\_

Custodian Address: \_\_\_\_\_

Tax ID: \_\_\_\_\_ Account Number: \_\_\_\_\_

**If the registration of the investment is held in a custodial account, signature is required on the below line with custodial stamp (to the right), in addition to the signature of the beneficial owner in Section 7.**

[AFFIX STAMP OR MEDALLION IN THIS AREA]



\_\_\_\_\_  
SIGNATURE OF AUTHORIZED INDIVIDUAL ON BEHALF OF  
CUSTODIAN

**AUTHORIZED SIGNATURES**

By signing below, I hereby agree to the terms of the Company's redemption program and the terms of this Redemption Request. **Investments held through Custodial accounts must be signed by the Custodian/Administrator. ALL SIGNATURES MUST BE MEDALLION SIGNATURE GUARANTEED.**

\_\_\_\_\_  
SIGNATURE (INVESTOR OR AUTHORIZED SIGNATORY)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE (JOINT INVESTOR, OR FOR CUSTODIAL HELD ACCOUNTS  
OF CUSTODIAN/ADMINISTRATOR)

\_\_\_\_\_  
DATE

