## Highlands REIT, Inc.

## Change of Distribution Election Form

IF THIS IS A CUSTODIAL ACCOUNT, SUCH AS AN IRA OR SEP, CONTACT YOUR CUSTODIAN. THE CUSTODIAN'S SIGNATURE IS REQUIRED IN ORDER TO PROCESS SUCH REQUESTS.

<b>A</b> -	CHANGE OF DISTRIBUTION	I ELECTION - Please mark one s	election only.			
	Mail Check to Address of Record					
	Send Distribution to a Third Party or via ACH:					
	☐ Via Mail (complete #1 through #4 below)					
	Via Electronic Deposit (ACH) (	complete #1 through #5 below and a	ttach a voided check)			
	Please check type of account:	Checking Savings				
1.	Name of Bank, Brokerage Firm or Individual *					
2.	Distribution Mailing Address					
3.	City				-	
4.	Account # (if applicable) A voided check must be submitted will not be processed.	ount # (if applicable) 5. Bank Routing # (For ACH Only)				
B- \$	SIGNATURE - Must be signed by		mer, the stockholder's sig	gnature(3) must be mede	illion guaranteed.	
Ciava	satura. Otaaldaaldaa	Date	Cianatura Ca Ctaa	l-b-al-d-a	Data	
Sigi	nature - Stockholder	Date	Signature - Co-Stoc	Knoidei	Date	
Printed Name of Stockholder			Printed Name of Co-Stockholder			
Account # (Required)			Telephone			
				Medallio	n Signature Guarantee REQUIRED	
_	nature - Custodian ** (if applicable) ledallion Guaranteed Signature or Co	orporate Resolution Required				
MA	IL COMPLETED FORM TO:					
High c/o [ P.O.	gular Mail: llands REIT, Inc. OST Systems, Inc. Box 219459 sas City, Missouri 64121	Overnight Delivery: Highlands REIT, Inc. c/o DST Systems, Inc. 430 W 7th Street Kansas City, Missouri 64105		All signatures must be	e medallion signature guaranteed	
High	estions: nlands REIT Investor Services 421.0533					