

CUSTODIAN CHANGE FORM

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION

Full Name of Fund:		
TRANSFEROR (SELLE		DI //
Custodian Name (Transferor)		
Custodian lax ID	Account Number	No. of Share / Units
INVESTOR INFORMA	TION:	
Investor Name		Investor Tax ID
Address		Phone #
		right, title and interest in the above named fund
		Medallion Signature Guarantee Required
ACCEPTING CUSTO	DIAN INFORMATION:	
Custodian Name (Transfe	ree)	Phone #
Address		Fax #
Custodian Tax ID	Account Number	No. of Share / Units
Authorized Custodian Signatur	e Date	
PRINT AND MAIL TO:		1
Transfer fee of \$70.00 payable to	h.ustratau	
Vistra USA LLC is required upon s Regular / Overnight Mail:	UDITIISSION	
Shopoff Realty Investments		
c/o Vistra USA LLC 125 E Sir Francis Drake Blve	d Suite 301	
Larkspur CA 94939-1820		

Medallion Signature Guarantee Required