



KKR Real Estate Select Trust Account Change Form

KKR Wealth Investor Relations: 1-888-920-1959 Option 1

**Please return
completed form to:**

Regular Mail:

KKR Democratized Access Vehicles
P.O. Box 219302
Kansas City, MO 64121-9302

Overnight Mail:

KKR Democratized Access Vehicles
801 Pennsylvania Ave., Suite 219302
Kansas City, MO 64105-1307

Email: KKRALT.ai@sscinc.com

Note: This is a submission box only, no response will be provided to any general or follow up inquiries.

Instructions

This form may be used to make the following changes:

Section 1.1: Change name due to: divorce or marriage, change of trustee **must be signed by investor(s)**

Section 1.2: Change or correction of address of record

Section 1.3: Add an interested party where duplicate statements may be sent

Section 2: Change the cost-basis method; **please discuss with your financial advisor**

Section 3: Change or Terminate Distribution instructions for non-qualified accounts

Please allow 30 days for change in distribution instructions to take effect

Section 4: Add or Modify account automatic investment plan

Section 5: Change Financial Advisor; **must be signed by investor(s)**

Section 6: Update account to send statements via electronic delivery

Section 7: Signatures

Please allow 30 days for change in distribution instructions to take effect. **Sections 1 and 7 must be completed for all requested changes.**

Please contact your custodian for the following changes on qualified accounts:

Change of custodian for a qualified account, such as an IRA.

Change of distribution destination, such as a custodian account number change.

Change of financial advisor.

1. Current Investor Information

Investor Name/Trustee

Co-Investor Name/Co-Trustee

1. Current Investor Information *(continued)***Required For All Changes.** Please type or use BLOCK letters

Account Number

Social Security Number/TIN

Account Registration

Please select the appropriate investment☐ Class D☐ Class U☐ Class I☐ Class S**1.1 Change of Name or Trustee on Account** (Due to Divorce/Marriage, Change of Trustee, etc.)**Important Notice:** Please provide supporting documentation with this form (i.e., Resignation/Acceptance of Trustee, Trust Amendment, Corporate Resolution, Copy of Marriage Certificate, Divorce Decree, Court Order, Death Certificate, etc.). Signature of Investor/New Trustee required in section 7. **Signature of removed Trustee (if applicable) is required below if removal is due to resignation.****Check all that apply:**☐ Name Change☐ Add Trustee☐ Remove Trustee

New Name

New Trustee Information (Complete, if applicable)

First Name

(MI)

Last Name

Social Security Number/Tax ID

Date of Birth (MM/DD/YYYY)

Phone Number

Street Address

City

State

Zip Code

Email Address

☐ Check here only if you do NOT consent to the electronic delivery**If Non-U.S. Citizen, Specify Country of Citizenship and Select One below** (Required, if applicable)☐ Resident Alien☐ Non-Resident Alien (Attach a completed Form W-8 BEN)**If you are a KKR Employee, Officer, Director or Affiliate, please select one below** (Required, if applicable)☐ KKR Employee☐ KKR Officer or Director☐ KKR Affiliate**Trustee(s) to Be Removed** (Complete, if applicable)**Note:** Removed Trustee's signature is required below if removal is due to resignation. Please attach supporting documentation for the Trustee's removal (i.e., death certificate, court order, resignation of trustee, etc.).

Name of Trustee to be Removed

Reason for Removal

☐ Death of Trustee☐ Incapacity of Trustee☐ Resignation of Trustee

Signature: Removed Trustee

Print Name

Date

1. Current Investor Information *(continued)*

1.2 Home/Legal Address Change or Mailing Address Change

Check all that apply:

☐ Home/Legal Address Change *(No P.O. boxes, please)*

☐ Mailing Address Change

Street Address

City

State

Zip Code

Phone Number

1.3. Interested Party Address

Mail a duplicate of all mailings to the interested party address.

Name

Mailing Address

City

State

Zip Code

2. Change Of Cost-Basis Method Of Computation

Select one. Custodial accounts require custodial authorization.

The Cost Basis Method you elect applies to all covered shares acquired from January 1, 2012 forward and to all identically registered existing and future accounts you may establish, unless otherwise noted. The Cost Basis method you select will determine the order in which shares are redeemed and how your cost basis information is calculated and subsequently reported to you and to the Internal.

Revenue Service (IRS). Please consult your tax advisor to determine which Cost Basis Method best suits your specific situation. If you do not elect a Cost Basis Method, your account will default to First in, First Out.

Primary Method (Select only one)

- ☐ **Average Cost** – averages the purchase price of acquired shares
- ☐ **First In, First Out** – oldest shares are redeemed first
- ☐ **Last In, First Out** – newest shares are redeemed first
- ☐ **Low Cost** – least expensive shares are redeemed first
- ☐ **High Cost** – most expensive shares are redeemed first
- ☐ **Loss/Gain Utilization** – depletes shares with losses prior to shares with gains and short-term shares prior to long-term shares
- ☐ **Specific Lot Identification** – you must specify the share lots to be sold at the time of a redemption *(This method requires you elect a Secondary Method below, which will be used for systematic redemptions and in the event the lots you designate for a redemption are unavailable.)*

2. Change Of Cost-Basis Method Of Computation *(continued)*

Secondary Method – applies only if Specific Lot Identification was elected as the Primary Method *(Select only one)*

- ☐ First In, First Out
- ☐ Last In, First Out
- ☐ Low Cost
- ☐ High Cost
- ☐ Loss/Gain Utilization

Note: If a Secondary Method is not elected, First In, First Out will be used.

3. Distribution Instructions Change

Please allow 30 days for change in distribution instructions to take effect.

A. ☐ **Enroll in the Distribution Reinvestment Plan**

B. ☐ **Enroll in Cash Distributions** (Select one option below)

IMPORTANT: For Custodial held accounts/accounts held through a Financial Intermediary, cash distributions must be deposited into your Custodial account of record. Please select option 2 below for funds to be electronically deposited into your custodial account of record.

1. ☐ **By mail** (Select one option below, if applicable)

- ☐ Mail to my address of record
- ☐ Mail to a third party address *(Please provide address below)*

Name of Financial Institution *(If applicable)*

Mailing Address

City

State

Zip Code

Account Number *(If applicable)*

2. ☐ **By wire/ACH**

NOTE: For Custodial held accounts/accounts held through a Financial Intermediary, cash distributions must be deposited into your custodial account of record. For Non-Custodial accounts (KREST is held directly with KKR), please provide ACH information below and provide a copy of a voided check.

I authorize KKR Real Estate Select Trust or its agent to deposit my distribution into my checking or savings account. This authority will remain in force until I notify KKR Real Estate Select Trust in writing to cancel it. In the event that KKR Real Estate Select Trust deposits funds erroneously into my account, they are authorized to debit my account for an amount not to exceed the amount of the erroneous deposit.

Name of Financial Institution

ABA Routing Number *(If applicable)*

Account Number

Account Registration

Street Address

City

State

Zip Code

4. Establish, Modify Or Delete Systematic Purchase Plan/Automatic Investment Plan

Check one:

☐ Establish a new plan

☐ Modify an existing plan

☐ Delete an existing plan

AIP permits automatic investments into the Fund by authorizing the Fund to deduct money directly from your checking account every month. Your bank must be a member of the Automated Clearing House (ACH). If you choose this option, please complete this section below.

Note: AIP does not apply to custodian-held accounts.

Please transfer \$ _____ (minimum \$500) from my bank account.

☐ Monthly

☐ Quarterly

Beginning on _____

Name of Depository Institution

Depository Institution Mailing Address

City

State

Zip Code

ABA Routing Number

Account Number

☐ Checking

☐ Savings

5. Financial Advisor Or Investor Representative Change

Must be authorized by signature of the investor(s) and accepting financial advisor.

New Broker-Dealer or Financial Institution Name

New Financial Advisor/Investor Representative Name(s)

Advisor Number

Advisor Branch #

Mailing Address

City

State

Zip Code

Phone Number

Fax Number

E-mail

Financial Representative Signature

Principal Signature (if applicable)

Date

Date



6. Investor Electronic Delivery Consent

☐ **Paperless delivery** (Please **check** box if you wish to elect this option)

E-Mail

By checking above, the investor requests to receive all shareholder communications electronically for all investment products or share classes sponsored by KKR Real Estate Select Trust or its affiliates. Communications include, but are not limited to, account statements, investor communications, annual, semi-annual and/or quarterly reports, tax forms, proxy materials and other required reports. The investor may request a paper copy of a shareholder communication, update an email address or change this election at any time by contacting Sample Funds. Changes may take up to 30 days to take effect. Consent to electronic delivery is terminated by an invalid email address. Costs associated with accessing the internet may be incurred and certain software may need to be downloaded in order to view the materials delivered electronically. Timely access to materials may not be available in the event of a system failure or network outage. This electronic delivery program may be changed or discontinued and the terms may be amended at any time. In the event of discontinuation or as required by law, the investor will receive paper copies of all shareholder communications.

☐ **Paper statements** (Please **check** box if you wish to elect this option)

7. Required Signatures

Required For All Changes.

Sections 1.1, 3 and 5 must be authorized with the signature of the Investor(s) and/ or Custodian.

Required Signatures - All Investors or Authorized Representative(s)

Signature of Investor

Signature of Co-Investor - OR - Custodian

Date

Date

Medallion Signature Guarantee Stamp is required when the custodian is signing on behalf of the Investor/Trustee and when Investor Name is changing or new banking instructions are provided for distributions.

Medallion Signature Guarantee