



**CUSTODIAL REGISTRATION CHANGE OF OWNERSHIP FORM**

This form may only be used to transfer ownership of shares (the "Securities") from a resigning custodian in a custodial registration (the "Resigning Custodian") in Resource Real Estate Opportunity REIT, Inc. to a new custodian in a custodial registration (the "New Custodian") for the **same beneficial owner**. **PLEASE NOTE:** *This form does not affect the distribution election currently in effect or the financial advisor for the account. If the beneficial owner wishes to modify the distribution election please complete the Account Update Request Form. If the beneficial owner wishes to change the financial advisor on the account, please complete the Resource Real Estate Change of Advisor/Broker Dealer Form.*

**Complete and deliver this form to:**

RESOURCE REAL ESTATE OPPORTUNITY REIT, INC.  
866-469-0129  
Fax: 816-701-8085

**Regular Mail**  
P.O. Box 219169  
Kansas City, MO 64121

**Overnight Delivery**  
430 West 7th Street  
Kansas City, MO 64105

**1. TYPE OF REGISTRATION** (Current registration)

**Custodial Registration**

- Traditional IRA** - *Custodian signature required.*
- Roth IRA** - *Custodian signature required.*
- KEOGH Plan** - *Custodian signature required.*
- Simplified Employee Pension/Trust (SEP)** - *Custodian signature required.*
- Pension or Profit Sharing Plan** - *Custodian signature required.*
- Other** (*Specify*): \_\_\_\_\_

\_\_\_\_\_  
*Custodian signature required.*

**Resigning Custodian Information**

Name of Custodian: \_\_\_\_\_  
Custodian Tax ID #: \_\_\_\_\_  
Custodian Account #: \_\_\_\_\_  
Custodian Telephone #: \_\_\_\_\_  
Street/P.O. Box: \_\_\_\_\_  
City, State, ZIP: \_\_\_\_\_

**2. BENEFICIAL OWNER REGISTRATION**

Name of Owner: \_\_\_\_\_ Tax ID/SS #: \_\_\_\_\_

Account #: \_\_\_\_\_

Street/P.O. Box: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

**3. RESIGNING CUSTODIAN SIGNATURE**

The Resigning Custodian hereby assigns and Transfers to the New Custodian all of the Securities in the custodial registration described above.

Signature of Resigning Custodian: \_\_\_\_\_ Date: \_\_\_\_\_

*Medallion Stamp Guarantee*

**4. NEW CUSTODIAN INFORMATION** *New Custodian signature required.*

Name of Custodian: \_\_\_\_\_ Custodian Tax ID #: \_\_\_\_\_

Custodian Account #: \_\_\_\_\_ Custodian Telephone #: \_\_\_\_\_

Street/P.O. Box: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Signature of New Custodian: \_\_\_\_\_ Date: \_\_\_\_\_

*Medallion Stamp Guarantee*

**5. BROKER/DEALER:** \_\_\_\_\_

**REGISTERED ADVISOR(S):** \_\_\_\_\_