



### Address Change Form

**PLEASE CHECK WHICH FUND(S) ARE UPDATING**

Black Creek Diversified Property Fund    Industrial Property Trust    Black Creek Industrial REIT IV

**CURRENT SUBSCRIBER INFORMATION** *(Please print name in which shares are registered)*

Investor Name \_\_\_\_\_ Co-Investor Name \_\_\_\_\_

Investor Social Security / Taxpayer ID # \_\_\_\_\_ Co-Investor Social Security / Taxpayer ID # \_\_\_\_\_

Birth Date / Articles of Incorporation (MM/DD/YY) \_\_\_\_\_ Co-Investor Birth Date (MM/DD/YY) \_\_\_\_\_

Brokerage Account Number \_\_\_\_\_ Home Telephone \_\_\_\_\_ E-mail Address \_\_\_\_\_

**OLD ADDRESS(ES)**

**Old Residence Address** *(no P.O. Box)*

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**Old Residence Address** *(if different from address at left)*

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**NEW ADDRESS(ES)**

**New Residence Address** *(no P.O. Box)*

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

**New Mailing Address** *(if different from address at left)*

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

\* If the co-investor resides at another address, please attach that address to this form.

**SIGNATURES**

Signature of Investor or Trustee \_\_\_\_\_ Date \_\_\_\_\_

Signature of Co-Investor or Trustee *(if applicable)* \_\_\_\_\_ Date \_\_\_\_\_

**You may fax this completed form to:** 816.374.7420

**Or you may mail this completed form to:**

**Direct Overnight Mail:**  
Black Creek Group  
c/o DST Systems Inc.  
430 West 7<sup>th</sup> Street, Suite 219079  
Kansas City, MO 64105

**P.O. Box:**  
Black Creek Group  
c/o DST Systems, Inc.  
P.O. Box 219079  
Kansas City, MO 64121-9079

**Black Creek Group Contact Information:**

**Phone:** 866.324.REIT (7348)

**Web Site:** blackcreekdiversified.com  
industrialpropertytrust.com  
bcindustrialiv.com

**E-mail:** operations@blackcreekgroup.com