

## 1. CURRENT ACCOUNT OWNER INFORMATION (Please print name(s) in which Shares are registered.)

Name (include Mr., Mrs., Dr., etc.)

Social Security Number or Taxpayer ID#

PLEASE CHECK ALL INVESTMENTS THAT APPLY (EACH SELECTED, A "COMPANY"):

(All account information is required)

Account Number

☐ SmartStop Self Storage REIT, Inc.

\_\_\_\_\_

☐ Strategic Storage Growth Trust II, Inc.

\_\_\_\_\_

☐ Strategic Storage Trust IV, Inc.

\_\_\_\_\_

☐ Strategic Student & Senior Housing Trust, Inc.

\_\_\_\_\_

**Complete this form and return to:**

Strategic Transfer Agent Services, LLC  
 10 Terrace Road  
 Ladera Ranch, CA 92694  
 PH: 866-418-5144  
 Fax: 949-429-6606  
 (Fax only accepted for non-custodial accounts)

\*\* Certain states may not recognize TOD registrations. Consult with your tax and financial professional for any limitations.

Strategic Transfer Agent Services, LLC, transfer agent for each Company, reserves the right to allow the following rules to apply to a TOD registration:

- A TOD may only be held on Individual or Joint Tenants with Right of Survivorship (JTWROS) registrations (not in an estate, trust, IRA, etc.).
- The TOD beneficiary must be an individual or entity and cannot be the JTWROS person.
- The TOD beneficiary must be named on this form; "spouse" or "children" are not acceptable designations.
- If you wish to have more than one beneficiary, the total investment amount will be divided into separate investments for each beneficiary designated. You must indicate the number of shares or the percentage breakdown for each beneficiary. (Attach additional pages if necessary).

## 2. TRANSFER ON DEATH DESIGNATION

By signing below, I (we) request that my (our) investment be registered in "transfer on death" form, and designate the following beneficiary(ies) as the individual(s) to whom the investment shall pass after I am (we are) deceased.

Print Name of Beneficiary	Date of Birth	Taxpayer ID#	Number or % of Shares
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of Custodian (Custodian required if under 18)

Beneficiary Type (check one)

Primary ☐

Contingent ☐

Print Name of Beneficiary

Date of Birth

Taxpayer ID#

Number or % of Shares

Name of Custodian (Custodian required if under 18)

Beneficiary Type (check one)

Primary ☐

Contingent ☐

Print Name of Beneficiary

Date of Birth

Taxpayer ID#

Number or % of Shares

Name of Custodian (Custodian required if under 18)

Beneficiary Type (check one)

Primary ☐

Contingent ☐

Print Name of Beneficiary

Date of Birth

Taxpayer ID#

Number or % of Shares

Name of Custodian (Custodian required if under 18)

Beneficiary Type (check one)

Primary ☐

Contingent ☐

By signing below, I (we) make the following warranties, representations and agreements:

- a) Company is not required to re-register the investment in the name of the beneficiary(ies) unless Company has received such documents as required to establish that I am (we both are) deceased.
- b) Company is not responsible for determining the tax consequences of the decision to register this investment to requested beneficiary(ies).
- c) I (we) agree to hold harmless, indemnify and defend Company and its agents for any claim, loss or liability resulting from i) breach of any warranty or representation in this agreement and/or ii) any action Company takes in connection with the registration, any re-registration in the name of the beneficiary, and from any distribution thereafter to the beneficiary, made as requested or authorized under this agreement.
- d) If this agreement is established under joint tenants with rights of survivorship account status, upon death of one of the owners, ownership shall pass to the surviving joint owner, and Company may follow the instructions of the survivor with regard to the investment, including without limitation, instructions to i) terminate transfer on death registration or ii) change TOD to beneficiary(ies).
- e) If I am married and established this account individually, or jointly and the joint applicant is not my spouse, my spouse's waiver has been executed by signing below.
- f) Strategic Transfer Agent Services, LLC and Company have not provided any legal advice to me (us), and I (we) agree to obtain the advice of an attorney with regard to the enforceability of this form of registration in my (our) state, and its affect on my (our) estate and tax planning.

**3. AUTHORIZED SIGNATURES** (All signatures must be medallion guaranteed unless this form is submitted at the time of investment.)

\_\_\_\_\_  
Signature – Current Account Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Current Account Owner Spouse's Waiver

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature – Joint Account Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Joint Account Owner Spouse's Waiver

\_\_\_\_\_  
Date

Medallion Signature Guarantee Stamp

Medallion Signature Guarantee Stamp