

f/k/a Carter Validus Mission Critical REIT II, Inc.

## ADVISORY FEE PAYMENT INSTRUCTION FORM

This instruction form may be used if you are a current investor in Sila Realty Trust, Inc. (the "REIT") who has purchased shares of the REIT, net of selling commissions, because you have a separate fee arrangement with your Registered Investment Advisor for investment advisory services. This form is for directing payment of advisory fees that you may owe to your Registered Investment Advisor from distributions that are otherwise payable to you from the REIT and may also be used to amend or terminate any such existing arrangement.

If your account is a qualified plan through a custodian, instructions must be sent to us by your custodian.

1. Investor Information	SSN or TIN Required
Investor #1 Name:	SSN/Tax ID:
	(First/Middle/Last)
Investor #2 Name:	SSN/Tax ID:
	(First/Middle/Last)
Account Number:	
2. Advisory Fee Paym	ent Instructions
	dge that any and all advisory fees payable to my Registered Investment Advisor are my sole responsibility, and the REIT pays the amounts ation, and that the REIT, its advisor and their respective affiliates are not undertaking any advisory or other fiduciary obligations to me as a result of
("Advisory Fee") calculated on a	we written advisory agreement (the "Advisory Agreement") requiring the payment by me to my Registered Investment Advisor of an advisory feet an annual basis as a stated percentage of the value of my assets under management by my Registered Investment Advisor, and the on any level of performance or payments by the REIT and remains fixed regardless of the frequency or amount of any payments by the REIT to me.
I represent that my investment in t	he REIT is an asset of my portfolio under management by my Registered Investment Advisor pursuant to the Advisory Agreement.
I covenant that I will promptly not	fy the REIT in the event that the Advisory Agreement is terminated or any of the provisions described are modified.
, ,	the terms of this instruction form with the REIT, including the reduction or the elimination of this procedure for payment to my Registered thout the approval of my Registered Investment Advisor.
I acknowledge that this payment i	nstruction will automatically terminate in the event that the Advisory Fee percentage equals or exceeds the distribution rate percentage.
I acknowledge that this will in no	way affect the distribution that I receive for tax purposes, and that distributions are not guaranteed and may vary.
name), from distributions otherwinstructed in writing by my Registe Advisor's Advisory Fees in the fo Advisory Fee percentage payable	ing below, I hereby instruct and authorize the REIT, or its agent, to make payable to
This instruction form shall serve as REIT with written notice of my elec	an instruction to the REIT, and/or its agent, to pay such advisory fees from my distributions otherwise payable to me until such time as I provide the tion to revoke this instruction.

3. Termination of Advisory F	ee rayment instructions		
By checking this box I hereby instruct of paying Advisory Fees to my Regist		ll future deductions from any distributions otherwise payable to me fr	om the REIT for the purpose
4. Investor Signatures			
MUST BE SIGNED BY ALL TITLEHOLDERS			
the instructions to be effective for distribut	ions to be paid in the following month. Forms	edge this fully executed form must be received five business days be s received after such date, and incomplete forms, will not be effective manner previously provided. This instruction supersedes all prior inst	e until the following month, or
Signature of Investor	Date	Signature of Joint Owner or, for Qualified Plans, of Trustee/Custodian	Date
5. Registered Investment Adv	isor Section		
the value of the investor's assets under m the frequency or amount of any payments	anagement by me, and the Advisory Fee is no s by the REIT to the investor.	by the investor to me of an Advisory Fee calculated on an annual but contingent on any level of performance or payments by the REIT ar	nd remains fixed regardless of
		ortfolio under management by me pursuant to the Advisory Agreemen	nt.
I covenant that I will promptly notify the R	EIT in the event that the Advisory Agreement is	s terminated or any of the provisions described are modified.	
I acknowledge that the investor may cha anytime without my approval.	nge the terms of the instruction form with the	e REIT, including the reduction or the elimination of this procedure f	or payment to me, at
payments of the Advisory Fee by the inv	, ,	year of (i) the amounts transmitted by the REIT to me pursuant to visory Fee to which I am entitled in accordance with the terms of is reasonably likely to occur.	, , ,
I represent and covenant that the Advisory Advisors Act of 1940 and other laws appl	· · · · · · -	in this instruction form are in accordance with all applicable requiren	nents of the Investment
Signature of Registered Investment Adviso	or Date		

## **Send Completed Requests To:**

Regular Mail Overnight Mail

Sila Realty Trust, Inc. c/o DST Systems, Inc. P.O. Box 219359 Kansas City, MO 64121-9359 Sila Realty Trust, Inc. c/o DST Systems, Inc. 430 W. 7th Street Suite #219359

Kansas City, MO 64105-1407

Investors: 833-404-4107