

IRA ADDITIONAL INVESTMENT FORM

SECTION 1: Account Information	n							
Account Number								
Owner's Name (Last, First, Middle Initial	()							
(,							
Owner's Social Security Number			ate of Birth (MN	A/DD/YY)				
				.,, ,				
Joint Owner (if applicable)								—
от о								
Address of Residence - P.O. Box is not	C	ity, State, Zip C	nde					
Address of Residence 7.5. Box is not	accopted	Č	10, 0000, 210 0	.000				
Mailing Address - If different from abov	ve (P.O. Boxes accept	red) C	ity, State, Zip C	ode				
maning hadrose in amorone from abou	70 (1.0. Boxes decope	.54)	11, 01010, 21,00	.000				
(<u>)</u> (Day Phone Eve	F	-mail Address						
	ening Phone		man Address					
SECTION 2: Purchase Request								
Purchases will be made at the next de	termined price after	your instructions are rec	eived in good o	rder. Reque	ests for purchase	s on a s	pecific date o	r at a
specific price will not be honored.								
How would you like to make your fund	purchase?							
☐ Check (enclose with this form) ☐ Wire		□ ACH	For	the year				
- Check (enclose with this form)	□ wiie	□ АСП	101	tile year.			_	
Fund Name		Fund Number	Ticker		Amount	or	Percent	%
RiverNorth/DoubleLine Strategic Income Fund Class I		14402	RNSIX	\$				_ %
RiverNorth/DoubleLine Strategic Income Fund Class R		14401	RNDLX	\$				_ %
RiverNorth Core Opportunity Fund Class R		14400	RNCOX	\$				_ %
RiverNorth Core Opportunity Fund Class I		14409	RNCIX	\$				_ %
RiverNorth/Oaktree High Income Fund Class I		14408	RNHIX	\$				_ %
RiverNorth/Oaktree High Income Fund Class R		14407	RNOTX	\$				_ %
Total				\$ _		_ =	100	% = %
Please Note: Bank information must be	e on file prior to the r	request for purchase or r	edemption. If vo	ou choose t	to, please comple	ete Sectio	on 3. If no tax	vear
is indicated, contribution is posted for			ouomption. It ye	, d 0110000 1	to, produce compre	710 GGG110	511 G. 11 110 tar	. your
SECTION 2: Undete or Add Doub	· Instructions			_			_	
SECTION 3: Update or Add Bank	rinstructions							
Please provide bank information if you	are establishing or n	nodifying wire transfer ca	pabilities and/o	or ACH tran	sfer capabilities.			
☐ I would like to add bank information	to this account to au	ithorize nurchase and red	demntions via:		:H transfer and/o	r 🗇 Wire	transfer	
a I would like to add ballk illionnation	to this account to ac	idionze parenase ana rec	icinptions via.	3 A0	in transier and, o	1 G Wile	uansici.	
I understand this authorization will		uch transactions via tele	ephone with an	Investor S	ervice Represent	ative; us	sing the auton	nated
service line; or on the website at ww	w.rivernortn.com.							
☐ I would like to modify my current bar	nk information on this	s account for purchases	and redemption	s via: 🗖 A	CH transfer and/	or 🛭 Wire	e transfer.	
Account type: Checking	□ Savings							
	a cavingo							
Name on Bank Account		В	ank Name					
ABA Routing Number (First 9 digits at ti	he bottom of the ched	ck or deposit slip)						

Bank Account Number (Second set of numbers at the bottom of check or deposit slip)

SECTION 3: Update or Add Bank Instructions (continued)

Please attach a voided check or savings deposit slip from the specified bank account.

■ Adding/changing bank information requires a signature guarantee. Please see Section 5.

I authorize RiverNorth Funds to initiate credit and debit entries to my account at the bank that I have indicated. I further agree that RiverNorth Funds will not be held accountable for any loss, liability, or expense for acting upon my instructions. It is understood that this authorization may be terminated by me at any time by written notification to RiverNorth Funds. The termination request will be effective as soon as RiverNorth Funds has had reasonable time to act upon it.

SECTION 4: Signatures

I authorize RiverNorth Funds to make the changes indicated to my account.

I authorize RiverNorth Funds, and it's agents to act upon instructions (by phone, in writing or other means) believed to be genuine for this account or any account into which exchanges are made. I agree that neither RiverNorth Funds nor its agents and affiliates will be liable for any loss, cost or expense for acting on such instructions, provided the Fund employs reasonable procedures to confirm that instructions are genuine.

ALL owners of this account must sign below:

Signature Date (MM/DD/YY)

SECTION 5: Signature Guarantee

A signature guarantee is required for adding or changing bank information.

To protect yourself against fraud, your signature(s) must be guaranteed ("Medallion Signature Guarantee") by any "eligible" guarantor. The Medallion Signature Guarantee stamp MUST include the words "Signature Guaranteed, Medallion Guaranteed" and comply with the Medallion program requirements. Signatures notarized by a Notary Public are not acceptable.

Eligible guarantor's: Commercial Banks

Credit Unions

Member Firms of a domestic stock exchange

National Securities Exchange & Savings (STAMP, SEMP, NYSE-MSP participation)

Savings Associations Trust Companies

Medallion Signature Guarantee Stamp (ID Required)

Bank or Dealer Firm

Officer's Title

Officer's Signature

Date (MM/DD/YY)

[STAMP]

Please mail completed form to:

Mailing Address RiverNorth PO Box 219427 Kansas City, MO 64121-9427

or Fax to 866-205-1499

If you have any questions, please contact an Investor Service Representative at 1-888-848-7569.