# FORTRESS CREDIT REALTY INCOMETRUST FORTRES



Instructions: The purpose of this form is to request repurchase of your common shares (the "shares" or "common shares") of Fortress Credit Realty Income Trust (the "Company"). Please complete all sections below.

Note: All requests for repurchases must be received in good order by 4:00 p.m. (Eastern time) on the second to last business day of the

applicable quarter.									
1   Repurchase from the	e following accoun	t							
Name(s) on the Account			Account Number			Social Security Number/TIN			
Financial Advisor Name		_	Financial Advisor Phone						
Repurchase Request Info	ormation	Share Class (se	lect one):						
Class B C	lass R Class	J-1 Class J-2	Class J-3	Class J-4	Class J-5	Class S	Class D	Class I	
2   Repurchase Amount	t (Check one, requi	red)		3   Repurch	ase Type (Ched	ck one, required	d)		
Repurchase Amount (	red):	Repurchase Type							
Repurchase Al			Death (provide copy of death certificate)*						
Number of Sha	Number of Shares:			Disability (provide physician certification form)*					
Dollar Amount			No	Normal					
							n due to Death or D date of determination		
4   Cost Basis Selection									
U.S. federal income tax apply, the "cost basis" these rules apply to the You should consult you Indicate below the cost IMPORTANT: If an opti	calculated for the Company's com ir own tax adviso t basis method yo	e shares involved warmon shares, includ r regarding the cons ou would like us to a	vill be reported ling those pur sequences of apply.	d to the Interr chased throu these new ru	nal Revenue S gh the Compa ules and your	Service ("IRS' any's distribut cost basis rep	') and to you. tion reinvestm	Generally nent plan.	
FIFO (First - In	/ First Out)								
LIFO (Last – In	/ First Out) (Note	e: Consult your tax a	advisor to det	ermine wheth	ner this metho	od is available	to you)		
Specific Lots, <sub>I</sub>	olease identify be	low:							
Date o		Amount of Purchase: Amount of Purchase:							
Date of Date of		Amount of Purchase:							
5   Wire Instructions									
For custodial held acco			the funds mu	ist be sent to	the custodia	n. Please prov	vide the wire i	instructions	
Account Name:									
Bank Name:									
ABA:									
DDA:									
FFC Account Name:									

FFC Account Number:



# 6 | Authorization and Signature

### By signing below, you hereby certify to, represent to, and instruct the Company:

To make a cash payment payable by wire transfer of the Transaction Price (as defined in the Company's share repurchase plan (the "Plan")) for common shares accepted for repurchase by the Company, without interest thereon and less any applicable withholding taxes, to which the signatory is entitled in accordance with the payment instructions on file;

You hereby offer for delivery to the Company the number of, or dollar amount in, common shares indicated in Section 2 above;

You have full power, authority, and capacity to execute this Repurchase Authorization;

The information provided above is true and correct; and

You authorize the custodian of the common shares (if applicable) to execute this Repurchase Authorization.

### IMPORTANT: Signature Guarantee may be required if any of the following applies:

Amount to be repurchased is over \$500,000.

The repurchase proceeds are being transferred by wire to an account other than the designated bank or brokerage account on file for at least 30 days.

The repurchase is to be sent to an address other than the address on record for the past 30 days.

If name has changed from the name in the account registration, we must have a one-and-the-same name signature guarantee. A one-and-the-same name signature guarantee must state "<Previous Name> is one-and-the-same as <New Name>" and you must sign your old and new name.

The transfer agent suspects fraudulent activity.

Investor Name (Please Print)	Investor Signature	Date		
Co-Investor Name (Please Print)	Signature	Date		
Signature Guarantee				
Affix Medallion Signature Guarantee Stamp Here – Custodian				
	Custodian and/or Broker/Dealer Authorization (if applicable)			

## Signature of Authorized Person

Please refer to the memorandum you received in connection with your initial investment in the Company, as amended by any amendments or supplements to that memorandum to date, for a description of the current terms of the Plan. The repurchase price will be available at https://pws.fortress.com/repurchase-offers-fcr. There are various limitations on your ability to request that the Company repurchase your shares, including, subject to certain exceptions, (i) an early repurchase deduction which provides that Class J-4, Class J-5, Class S, Class D, Class I and Class E shares that have not been outstanding for at least one year will be repurchased at 98% of the Transaction Price and (ii) a mandatory holding period of two years applicable to Class B, Class B, Class J-1, Class J-2, Class J-3, Class J-3, Class J-4, Class J-5, Class S, Class D, Class I and Class E shares (including repurchases at certain non-U.S. investor access funds primarily created to hold the Company's S, Class B, C

Once completed, send to:

Regular Mail: Fortress Investment Group

PO Box 219090

Kansas City, MO 64121-9090

Any questions? Email: FCR@fortress.com

Toll Free: 1-866-966-0155