



**ENROLLMENT FORM
UNITED DEVELOPMENT FUNDING IV
DISTRIBUTION REINVESTMENT PLAN**

To Participate in the Distribution Reinvestment Plan:

Please complete and return this enrollment form. Be sure to include your signature below in order to indicate your participation in the Distribution Reinvestment Plan (“DRIP”).

I hereby appoint DST Systems, Inc. (the “Administrator”) (or any designee or successor), acting as administrator, as my agent to receive cash distributions that may hereafter become payable to me on common shares of beneficial interest (“Shares”) of United Development Funding IV registered in my name as set forth below, and authorize the Administrator to apply such distributions to the purchase of full Shares and fractional interests in Shares.

I understand that the purchases will be made under the terms and conditions of the DRIP as described in the Prospectus and that I may revoke this authorization at any time by notifying the Administrator, in writing, of my desire to terminate my participation.

By signing below, I elect to participate in the DRIP with respect to 100% of my Shares.

Signature: _____

Date: _____

Registered name on account: _____

UDF Account Number, if applicable: _____

Joint Owner, if applicable:

Signature: _____

Date: _____

Registered name on account: _____