

# Account Transfer Form

**GOLUB CAPITAL**

## TRANSFEROR/SELLER SECTION

**IMPORTANT:** Transferor/Seller and Transferee/Buyer Sections must be submitted simultaneously. To be completed by individual to whom shares are being transferred/sold. For more than one transferee/buyer, please print/complete additional copies of Transferee/Buyer Section.

### 1. Transferor/Seller

(Indicate the exact name of the registrant and include any custodial information)

S Share Class       D Share Class       I Share Class

TRANSFEROR/SELLER

CO-TRANSFEROR/SELLER

TRANSFEROR/SELLER SOCIAL SECURITY/TAXPAYER ID #,  
IF APPLICABLE

CO-TRANSFEROR/SELLER SOCIAL SECURITY/TAXPAYER ID #

CUSTODIAN/TRUSTEE TAX ID #, IF APPLICABLE

ACCOUNT NUMBER

BROKERAGE ACCOUNT #,  
IF APPLICABLE

HOME TELEPHONE

EMAIL ADDRESS

STREET ADDRESS

CITY

STATE

ZIP

If transferring out of a trust account please check appropriate box:

Grantor Trust       Non-Grantor Trust

### 2. Transferor/Seller Information

(Check all that apply)

Reason for Transfer:     Re-registration (Change of name, individual to trust, etc.)       Death (Include copy of Death Certificate.)

DATE OF DEATH

Divorce (Include copy of Divorce Decree.)       Gift       Custodian Change

Other (Please specify.): \_\_\_\_\_

Secondary Market Transfer \$ \_\_\_\_\_  
PER SHARE

Transfer Quantity: Number/Percentage of shares to be transferred/sold: \_\_\_\_\_

### 3. Transferor/Seller signatures

The Transferor/Seller hereby certifies and represents possession of valid title and all requisite power to assign such shares and that assignment is in accordance with applicable laws and regulations and further certifies, under penalty of law, that the reason for transfer provided is correct.

SIGNATURE OF TRANSFEROR/SELLER OR TRUSTEE

DATE

SIGNATURE OF CO-TRANSFEROR/SELLER OR TRUSTEE, IF APPLICABLE

DATE

SIGNATURE OF CUSTODIAN

GUARANTOR: AFFIX MEDALLION SIGNATURE GUARANTEE HERE.

A Medallion Signature Guarantee is required for assignor signature. A notary public is not an acceptable guarantor.

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### 4. Type of ownership

(Select one only; all authorized owners must sign in section 11)

#### Non-Custodial Ownership (Taxable Accounts)

BROKERAGE ACCOUNT NUMBER

- Individual or Joint Tenant with Rights of Survivorship**
  - Transfer on Death**  
Not available for Louisiana Residents. Fill out Transfer on Death Form to effect designation.  
(Available through your financial professional)
- Tenants in Common**
- Community Property**
- Uniform Gift/Transfer to Minors**  
State of \_\_\_\_\_  
Date of Birth \_\_\_\_\_
- Trust**  
Additional documentation required in section 5C.
- C Corporation**
- S Corporation**
- Profit-Sharing Plan**
- Non-Profit Organization**
- Limited Liability Corporation**
- Corporation/Partnership/Other**  
Additional documentation required in section 5C.

#### Custodial Ownership (Non-Taxable Accounts)

CUSTODIAN ACCOUNT NUMBER

- IRA** (Custodian signature required)
- Roth IRA** (Custodian signature required)
- SEP IRA** (Custodian signature required)
- Rollover IRA** (Custodian signature required)
- Inherited IRA**
- Pension Plan**  
Additional documentation required in section 5C.
- Other** (Specify) \_\_\_\_\_

#### (Required for custodial ownership accounts)

**Custodian Information** (To be completed by Custodian listed above.)

NAME OF CUSTODIAN

CUSTODIAN TAX ID #

CUSTODIAN TELEPHONE #

### 5. Transferee/Buyer

#### A. Investor Information (Investor/Trustee/Executor/Authorized Signatory Information)

FIRST NAME

LAST NAME

SOCIAL SECURITY/TAXPAYER ID #

DATE OF BIRTH (MM/DD/YYYY)

TELEPHONE #

EMAIL ADDRESS

#### Residential Address (no P.O. Box)

STREET ADDRESS

CITY

STATE

ZIP

#### Mailing Address (if different from above)

STREET ADDRESS

CITY

STATE

ZIP

#### Please Indicate Citizenship Status

- U.S. Citizen**
- Resident Alien**
- Non-Resident Alien**

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### B. Co-Investor Information

(Co-Investor/Co-Trustee/Co-Authorized Signatory Information, if applicable)

FIRST NAME

LAST NAME

SOCIAL SECURITY/TAXPAYER ID #

DATE OF BIRTH (MM/DD/YYYY)

TELEPHONE #

EMAIL ADDRESS

**Residential Address** (no P.O. Box)

STREET ADDRESS

CITY

STATE

ZIP

**Mailing Address** (if different from above)

STREET ADDRESS

CITY

STATE

ZIP

**Please Indicate Citizenship Status**

U.S. Citizen

Resident Alien

Non-Resident Alien

### C. Entity Information — Retirement Plan/Trust/Corporation/Partnership/Other

(Trustee(s) and/or Authorized Signatory(s) information MUST be provided in sections 5A and 5B)

ENTITY NAME

ENTITY TAX ID #

DATE OF FORMATION

ENTITY ADDRESS (LEGAL ADDRESS — REQUIRED)

EXEMPTIONS (SEE FORM W-9 INSTRUCTIONS AT WWW.IRS.GOV)

**Entity Type** (Select one — required)

**Retirement Plan** (Certification of Investment Powers Form required)

**Other** (Specify) \_\_\_\_\_

**Trust** (Certification of Investment Powers Form or first and last pages of the trust documents required)

**Exempt payee code** (if any) \_\_\_\_\_

**S-Corp** (Corporate Resolution required)

**Jurisdiction** (if non-U.S.) (Attach a completed applicable Form W-8)

**C-Corp** (Corporate Resolution required)

**LLC** (Plan documentation required)

**Exemption from FATCA reporting code** (if any)

**Partnership** (Partnership agreement required)

### D. ERISA Plan Asset Regulations

All Transferees/Buyers must complete Appendix A attached hereto.

## TRANSFEROR/SELLER SECTION

**IMPORTANT: Transferor/Seller and Transferee/Buyer Sections must be submitted simultaneously. To be completed by individual to whom shares are being transferred/sold. For more than one transferee/buyer, please print/complete additional copies of Transferee/Buyer Section.**

### 6. E-consent

Instead of receiving paper copies of the prospectus, prospectus supplements, annual reports, tax documents, proxy statements, and other stockholder communications and reports, you may elect to receive electronic delivery of stockholder communications from Golub Capital Private Credit Fund. If you would like to consent to electronic delivery, including pursuant to e-mail, please check the box below for this election.

We encourage you to reduce printing and mailing costs and to conserve natural resources by electing to receive electronic delivery of stockholder communications and statement notifications. By consenting below to electronically receive stockholder communications, including your account specific information, you authorize us to either (i) e-mail stockholder communications to you directly or (ii) make them available on our website and notify you by e-mail when and where such documents are available.

Your consent to electronic delivery will be on an unlimited duration and you will not receive paper copies of these electronic materials unless (i) specifically requested, (ii) you inform us in writing that you revoke your consent, (iii) the delivery of electronic materials is prohibited or (iv) we, in sole discretion, elect to send paper copies of materials.

By consenting to electronic access, you will be responsible for your customary internet service provider charges and may be required to download software in connection with access to these materials.

I consent to electronic delivery

EMAIL ADDRESS

If blank, the e-mail address provided in section 5 will be used.

### 7. Transfer Information

#### Transfer Quantity

Number/Percentage of shares to be transferred/bought: \_\_\_\_\_

Do you already own shares?  Yes  No

### 8. Suitability—To be completed by the individuals who are acquiring shares

	Investor	Co-Investor
a) I am not an affiliate of Golub Capital Private Credit Fund or its advisor, and the shares being transferred were acquired by me for investment purposes only and not for immediate resale.	Initials _____	Initials _____
b) I have (i) a minimum net worth (exclusive of home, home furnishings and personal automobiles) of at least \$250,000, or (ii) a minimum net worth (exclusive of home, home furnishings and personal automobiles) of at least \$70,000 AND a minimum annual gross income of at least \$70,000.	Initials _____	Initials _____
c) I have received the prospectus (as amended or supplemented) for Golub Capital Private Credit Fund.	Initials _____	Initials _____
d) In addition to the general suitability requirements described above, I meet the higher suitability requirements, if any, imposed by my state of primary residence as set forth in the prospectus under "SUITABILITY STANDARDS."	Initials _____	Initials _____
e) I acknowledge that there is no public market for the shares, shares of this offering are not liquid and appropriate only as a long-term investment.	Initials _____	Initials _____
f) I acknowledge that the shares have not been registered and are not expected to be registered under the laws of any country or jurisdiction outside of the United States except as otherwise described in the prospectus.	Initials _____	Initials _____
g) I am purchasing the shares for my own account, or if I am purchasing shares on behalf of a trust or other entity of which I am a trustee or authorized agent, I have due authority to execute this subscription agreement and do hereby legally bind the trust or other entity of which I am trustee or authorized agent.	Initials _____	Initials _____

**If you live in any of the following states, please complete Appendix B: Alabama, California, Idaho, Iowa, Kansas, Kentucky, Maine, Massachusetts, Missouri, Nebraska, New Jersey, New Mexico, North Dakota, Ohio, Oklahoma, Oregon, Puerto Rico, Tennessee and Vermont.**

In the case of sales to fiduciary accounts, the minimum standards in Appendix B shall be met by the beneficiary, the fiduciary, account, or, by the donor or grantor, who directly or indirectly supplies the funds to purchase the shares if the donor or grantor is the fiduciary.

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### 9. Distributions

You are automatically enrolled in the Distribution Reinvestment Plan, unless you are a resident of **ALABAMA, ARKANSAS, CALIFORNIA, IDAHO, KANSAS, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEBRASKA, NEW JERSEY, NORTH CAROLINA, OHIO (Class I only), OKLAHOMA, OREGON, TEXAS, VERMONT OR WASHINGTON.**

If you are not a resident of the states listed above, you are automatically enrolled in the Distribution Reinvestment Plan; **please check here if you DO NOT** wish to be enrolled in the Distribution Reinvestment Plan and complete the Cash Distribution Information section below.

**ONLY** complete the following information if you do not wish to enroll in the Distribution Reinvestment Plan. Residents of Ohio who are holders of Class S or Class D shares are required to complete the following information. For custodial held accounts, if you elect cash distributions the funds must be sent to the custodian.

- A.  Check mailed to street address in 5A (only available for non-custodial investors).
- B.  Check mailed to secondary address in 5B (only available for non-custodial investors).
- C.  Direct Deposit by ACH (only available for non-custodial investors; complete section below).
- D.  Check mailed to third-party Financial Institution (complete section below).

If you **ARE** a resident of Alabama, Arkansas, California, Idaho, Kansas, Kentucky, Maine, Maryland, Massachusetts, Nebraska, New Jersey, North Carolina, Ohio (Class I only), Oklahoma, Oregon, Texas, Vermont or Washington, you are not automatically enrolled in the Distribution Reinvestment Plan. **Please check here if you wish to enroll in the Distribution Reinvestment Plan. You will automatically receive cash distributions unless you elect to enroll in the Distribution Reinvestment Plan.**

If you **ARE** a resident of Ohio and a holder of Class S or Class D Shares, please check here. You are **NOT** eligible to participate in our Distribution Reinvestment Plan.

*I authorize Golub Capital Private Credit Fund or its agent to deposit my distribution into my checking or savings account. This authority will remain in force until I notify Golub Capital Private Credit Fund in writing to cancel it. In the event that Golub Capital Private Credit Fund deposits funds erroneously into my account, they are authorized to debit my account for an amount not to exceed the amount of the erroneous deposit.*

NAME OF FINANCIAL INSTITUTION

STREET ADDRESS

CITY

STATE

ZIP

NAME(S) ON ACCOUNT

ABA NUMBER/BANK ACCOUNT NUMBER

ACCOUNT NUMBER

**Checking** (Attach a voided check)

**Savings** (Attach a voided deposit slip)

**Brokerage**

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### 10. Broker/Dealer—To be completed by the Registered Representative (RR)

NAME OF REGISTERED REPRESENTATIVE

STREET ADDRESS

CITY

STATE

ZIP

HOME OFFICE MAILING ADDRESS

BROKER/DEALER NAME

TELEPHONE NUMBER

B/D REP #

REGISTERED REPRESENTATIVE'S  
TELEPHONE NUMBER

REPRESENTATIVE'S EMAIL ADDRESS

### 11. Transferee/Buyer signatures and taxpayer identification number certification

As the investor signing below, under penalties of perjury, I certify that 1) The number shown in the Transferee/Buyer Social Security/Taxpayer ID # field in section 5 of this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and 2) I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or distributions, or (c) the IRS has notified me that I am no longer subject to backup withholding, and 3) I am a U.S. citizen or other U.S. person (as defined in the instructions to IRS Form W-9). **NOTE:** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and distributions on your tax return.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

SIGNATURE OF TRANSFEREE/BUYER OR TRUSTEE

DATE

SIGNATURE OF CO-TRANSFEREE/BUYER OR TRUSTEE, IF APPLICABLE

DATE

SIGNATURE OF CUSTODIAN, IF APPLICABLE

If signature is by trustee(s), executors(s), administrator(s), guardian(s), attorney(ies)-in-fact, agent(s), officer(s) of a corporation or another acting in a fiduciary or representative capacity, please provide the information in section 5a or 5b.

#### Guarantor:

Affix Medallion Signature Guarantee here.

A Medallion Signature Guarantee is required for transferor/seller/custodian signature(s). A notary public is not an acceptable guarantor.

**IMPORTANT:** Transferor/Seller and Transferee/Buyer Sections must be submitted simultaneously. Please mail this completed form to:

**Direct Overnight Mail:**

Golub Capital  
c/o SS&C  
430 W 7th Street Suite  
219098  
Kansas City, MO 64105-1407

**P.O. Box:**

Golub Capital  
c/o SS&C  
PO Box 219098  
Kansas City, MO 64121-9098

**Instructions: All Transferees/Buyers please complete this Appendix A in its entirety.**

1. Are you a “benefit plan investor” within the meaning of the Plan Asset Regulations<sup>1</sup> or will you use the assets of a “benefit plan investor”<sup>2</sup> to invest in Golub Capital Private Credit Fund?  Yes  No
  
2. If Question (1) above is “yes” please indicate what percentage of the purchaser’s assets invested in Golub Capital Private Credit Fund are considered to be the assets of “benefit plan investors” within the meaning of the Plan Asset Regulations: \_\_\_\_\_ %
  
3. If you are investing the assets of an insurance company general account please indicate what percentage of the insurance company general account’s assets invested in Golub Capital Private Credit Fund are the assets of “benefit plan investors” within the meaning of Section 401(c)(1)(A) of the Employee Retirement Income Security Act of 1974, as amended, or the regulations promulgated thereunder? \_\_\_\_\_ %
  
4. Please indicate if you are “Controlling Person” defined as: (i) a person (including an entity), other than a “benefit plan investor” who has discretionary authority or control with respect to the assets of Golub Capital Private Credit Fund, a person who provides investment advice for a fee (direct or indirect) with respect to such assets, or any “affiliate” of such a person. An “affiliate” of a person includes any person, directly or indirectly, through one or more intermediaries, controlling, controlled by, or under common control with the person. For purposes of this definition, “control,” with respect to a person other than an individual, means the power to exercise a controlling influence over the management or policies of such person.  Yes  No

1. “Plan Asset Regulations” means the regulations issued by the United States Department of Labor at Section 2510.3 101 of Part 2510 of Chapter XXV, Title 29 of the United States Code of Federal Regulations, as modified by Section 3(42) of ERISA, as the same may be amended from time to time.

2. The term “benefit plan investor” includes, for e.g.,: (i) an “employee benefit plan” as defined in section 3(3) of the U.S. Employee Retirement Income Security Act of 1974, as amended (“ERISA”), that is subject to Title I of ERISA (such as employee welfare benefit plans (generally, plans that provide for health, medical or other welfare benefits) and employee pension benefit plans (generally, plans that provide for retirement or pension income)); (ii) “plans” described in section 4975(e)(1) of the U.S. Internal Revenue Code of 1986, as amended (the “Code”), that is subject to section 4975 of the Code (including, for e.g., an “individual retirement account,” an “individual retirement annuity,” a “Keogh” plan, a pension plan, an Archer MSA described in section 220(d) of the Code, a Coverdell education savings account described in section 530 of the Code and a health savings account described in section 223(d) of the Code) and (iii) an entity that is, or whose assets would be deemed to constitute the assets of, one or more “employee benefit plans” or “plans” (such as for e.g., a master trust or a plan assets fund) under ERISA or the Plan Asset Regulations.

For purposes of determining whether you satisfy the standards below, your net worth is calculated excluding the value of your home, home furnishings and automobiles, and, unless otherwise indicated, “liquid net worth” is defined as that portion of net worth that consists of cash, cash equivalents and readily marketable investments.

**Investors in the following states have the additional suitability standards as set forth below.**

	Primary Investor Initials	Co-Investor Initials
- If I am an <b>Alabama</b> resident, in addition to the suitability standards set forth above, an investment in Golub Capital Private Credit Fund will only be sold to me if I have a liquid net worth of at least 10 times my investment in Golub Capital Private Credit Fund and its affiliates.	Initials _____	Initials _____
- If I am a <b>California</b> resident, in addition to the suitability standards set forth above, I may not invest more than 10% of my net worth in Golub Capital Private Credit Fund. Investors who are accredited investors as defined in Regulation D under the Securities Act of 1933, as amended (the “Securities Act”), are not subject to the foregoing investment concentration limit.	Initials _____	Initials _____
- If I am an <b>Idaho</b> resident, I must have either (a) a liquid net worth of \$85,000 and annual gross income of \$85,000 or (b) a liquid net worth of \$300,000. Additionally, the total investment in Golub Capital Private Credit Fund shall not exceed 10% of my liquid net worth.	Initials _____	Initials _____
- If I am an <b>Iowa</b> resident, I (i) have either (a) an annual gross income of at least \$100,000 and a net worth of at least \$100,000, or (b) a net worth of at least \$350,000 (net worth should be determined exclusive of home, auto and home furnishings); and (ii) limit my aggregate investment in this offering and in the securities of other non-traded business development companies to 10% of my liquid net worth (liquid net worth should be determined as that portion of net worth that consists of cash, cash equivalents and readily marketable securities). Purchasers who are accredited investors as defined in Regulation D under the Securities Act are not subject to the foregoing concentration limit.	Initials _____	Initials _____
- If I am a <b>Kansas</b> resident, I understand that it is recommended by the Office of the Securities Commissioner that I limit my aggregate investment in Golub Capital Private Credit Fund’s securities and other non-traded business development companies to not more than 10% of my liquid net worth. For these purposes, liquid net worth shall be defined as that portion of total net worth (total assets minus total liabilities) that is comprised of cash, cash equivalents and readily marketable securities.	Initials _____	Initials _____
- If I am a <b>Kentucky</b> resident, I may not invest more than 10% of my liquid net worth in Golub Capital Private Credit Fund or its affiliates. “Liquid net worth” is defined as that portion of net worth that is comprised of cash, cash equivalents and readily marketable securities.	Initials _____	Initials _____
- If I am a <b>Maine</b> resident, I acknowledge that it is recommended by the Maine Office of Securities that my aggregate investment in this offering and other similar direct participation investments not exceed 10% of my liquid net worth. For this purpose, “liquid net worth” is defined as that portion of net worth that consists of cash, cash equivalents and readily marketable securities.	Initials _____	Initials _____
- If I am a <b>Massachusetts</b> resident, in addition to the suitability standards set forth above, I may not invest more than 10% of my liquid net worth in Golub Capital Private Credit Fund and in other illiquid direct participation programs.	Initials _____	Initials _____
- If I am a <b>Missouri</b> resident, in addition to the suitability standards set forth above, I may not invest more than 10% of my liquid net worth in Golub Capital Private Credit Fund.	Initials _____	Initials _____
- If I am a <b>Nebraska</b> resident, in addition to the suitability standards set forth above, I must limit my aggregate investment in this offering and the securities of other business development companies to 10% of my net worth. Investors who are accredited investors as defined in Regulation D under the Securities Act are not subject to the foregoing investment concentration limit.	Initials _____	Initials _____



	Primary Investor Initials	Co-Investor Initials
<p>- If I am a <b>New Jersey</b> resident, (1) I have either (a) a minimum liquid net worth of at least \$100,000 and a minimum annual gross income of \$85,000, or (b) a minimum liquid net worth of \$350,000. For these purposes, “liquid net worth” is defined as that portion of net worth (total assets exclusive of home, home furnishings, and automobiles, minus total liabilities) that consists of cash, cash equivalents and readily marketable securities. In addition, my total investment in Golub Capital Private Credit Fund, its affiliates and other non-publicly traded direct investment programs (including real estate investment trusts, business development companies, oil and gas programs, equipment leasing programs and commodity pools, but excluding unregistered, federally and state exempt private offerings) may not exceed 10% of my liquid net worth, (2) I acknowledge that although GC Advisors LLC (the “Adviser”), the investment adviser to Golub Capital Private Credit Fund, will advance all organization and offering expenses of Golub Capital Private Credit Fund through the date on which Golub Capital Private Credit Fund commences this offering, and may elect to pay certain of Golub Capital Private Credit Fund’s expenses, Golub Capital Private Credit Fund is obligated to reimburse the Adviser, and this will reduce the returns available to investors, and (3) I acknowledge that if I buy Class S shares, Class D shares or Class I shares through certain financial intermediaries, they may directly charge transaction or other fees, including upfront placement fees or brokerage commissions, in such amounts as they may determine, provided that they limit such charges to a 0.85% cap on NAV for Class S shares and a 0.25% cap on NAV for Class D shares (No transaction or other fees, including upfront placement fees or brokerage commissions will be paid with respect to the Class I shares).</p>	Initials _____	Initials _____
<p>- If I am a <b>New Mexico</b> resident, in addition to the general suitability standards listed above, I may not invest, and Golub Capital Private Credit Fund may not accept from me more than ten percent (10%) of my liquid net worth in shares of Golub Capital Private Credit Fund, its affiliates and in other non-traded business development companies. Liquid net worth is defined as that portion of net worth which consists of cash, cash equivalents and readily marketable securities.</p>	Initials _____	Initials _____
<p>- If I am a <b>North Dakota</b> resident, I have a net worth of at least ten times my investment in Golub Capital Private Credit Fund.</p>	Initials _____	Initials _____
<p>- If I am an <b>Ohio</b> resident, it is unsuitable to invest more than 10% of my liquid net worth in Golub Capital Private Credit Fund, affiliates of Golub Capital Private Credit Fund, and in any other non-traded business development company. “Liquid net worth” is defined as that portion of net worth (total assets exclusive of primary residence, home furnishings and automobiles minus, total liabilities) comprised of cash, cash equivalents and readily marketable securities. Holders of Class S or Class D shares who are Ohio residents are not eligible to participate in the Distribution Reinvestment Plan.</p>	Initials _____	Initials _____
<p>- If I am an <b>Oklahoma</b> resident, I may not invest more than 10% of my liquid net worth in Golub Capital Private Credit Fund.</p>	Initials _____	Initials _____
<p>- If I am an <b>Oregon</b> resident, in addition to the suitability standards set forth above, I may not invest more than 10% of my liquid net worth in Golub Capital Private Credit Fund and its affiliates. Liquid net worth is defined as net worth excluding the value of the investor’s home, home furnishings and automobile.</p>	Initials _____	Initials _____
<p>- If I am a <b>Puerto Rico</b> resident, I may not invest more than 10% of my liquid net worth in Golub Capital Private Credit Fund, its affiliates and other non-traded real estate investment programs. For these purposes, “liquid net worth” is defined as that portion of net worth (total assets exclusive of primary residence, home furnishings and automobiles minus total liabilities) consisting of cash, cash equivalents and readily marketable securities.</p>	Initials _____	Initials _____
<p>- If I am a <b>Tennessee</b> resident, I must have a liquid net worth of at least ten times my investment in Golub Capital Private Credit Fund.</p>	Initials _____	Initials _____
<p>- If I am a <b>Vermont</b> resident and I am an accredited investor in Vermont, as defined in 17 C.F.R. § 230.501, I may invest freely in this offering. In addition to the suitability standards described above, if I am a non-accredited Vermont investor, I may not purchase an amount in this offering that exceeds 10% of my liquid net worth. For these purposes, “liquid net worth” is defined as an investor’s total assets (not including home, home furnishings or automobiles) minus total liabilities.</p>	Initials _____	Initials _____