BPC Cliffwater Private Credit Fund Redemption Form | August 2025

Individual / Joint investors / Sole trader / Informal trusts only (i.e. 'In Trust for' minors under 18 years of age)

This Redemption Form is used to request a redemption of units from the BPC Cliffwater Private Credit Fund (APIR Code BSC7690AU), a separate class of units in the registered managed investment scheme known as BPC Cliffwater Private Credit Access Fund (ARSN 679 418 378) (the Fund), issued by Betashares Capital Limited (Betashares).

Redemption requests must be received by the Responsible Entity by no later than 2.00pm (Sydney time) on the Redemption Request Cut-Off Date, available from our website at https://www.betashares.com.au/fund/private-credit-fund/. Redemptions requests received on or after 2.00pm (Sydney time) on the Redemption Request Cut-Off Date in respect of a redemption period will be declined and a new redemption request will need to be submitted for the next quarter (on or before the applicable Redemption Request Cut-Off Date).

Investors who submit a redemption request will be required to maintain a minimum holding of \$2,500. If a redemption request would cause the investor's holding to fall below this minimum holding amount, the investor will be taken to have submitted the redemption request for their entire unit holding.

Please refer to the Product Disclosure Statement for the Fund (PDS), available at [website URL], for more information regarding the redemption process, as well as liquidity and other risks relating to the Fund.

Please use BLOCK capital letters and tick (\checkmark) boxes where applicable.

Step	1. Inve	estor details						
Portfolio	Number							
Investor 1 Title (Mr/Mrs/Miss/Ms)					Investor 2 Title (Mr/Mrs/	/Miss/Ms)		
Full customer name (given name, middle name(s), family name)					Full customer name (given name, middle name(s), family name)			
Date of birth					Date of birth			
Phone number					Phone number			
Registered address					Registered address			
Suburb					Suburb			
State		Postcode	Country		State	Postcode	Country	
Email address					Email address			
Sten	2 Pav	ment details						
		itial investment wa		your pa	yment details	below are different pe	er your application, Betashares mag	
Please di	irect credi	t the following bar	nk account:					
Financial institution					Branch address			
Account	name				BSB	Account numb	per	

Step 3. Redemption details

The minimum investment balance for the Fund is outlined below. If you make a redemption request which will result in your investment balance falling below the minimum investment balance, you agree Betashares may treat your redemption request as relating to all of your remaining units in the Fund.

	APIR code	Minimum	Please select one of the following
Please select Fund (✓)		balance amount (\$)	Redemption amount
BPC Cliffwater Private Credit Fund, a separate class of units in the registered managed investment scheme known as BPC Cliffwater Private Credit Access Fund (ARSN 679 418 378)	BSC7690AU	\$2,500	\$

[.] Betashares have absolute discretion to refuse or partially satisfy any withdrawal request above this cap.

Step 4. Declaration and signatures

General

I/We acknowledge that this redemption request is subject to the terms set out in the current Product Disclosure Statement (PDS) available at https://www.betashares.com.au/fund/private-credit-fund/

I/We acknowledge and agree to the maximum extent permitted by law to release discharge and indemnify the responsible entity from and against all actions, proceedings, accounts, costs, expenses, charges, liabilities, claims and demands arising directly or indirectly as a result of the instructions given in this redemption request.

I/We declare that all details in this form are true and correct.

Please sign this form where indicated below. This form must be signed as per the current signing instructions we have on record. If no amendments have been made, the current signatories for the account are the individuals who signed the initial investment application form.

Electronic instructions

In respect of electronic instructions (email or fax) you agree and acknowledge, warrant and agree that Betashares:

- will determine at its absolute discretion whether it will reject or accept electronic instructions;
- is not responsible for any loss or delay that results from a transmission not being received by Betashares;
- will only process electronic instructions if they are received in full and contain all the required information as determined by Betashares to validate the instructions;
- may require you to provide a duly executed hard copy of the instructions and/or further information necessary for Betashares to validate the instructions;
- will not accept a receipt confirmation from the sender's facsimile machine or computer as evidence of receipt of the instructions;
- · will not compensate you for any losses relating to electronic instructions, unless required to do so by law; and
- · does not take responsibility for any fraudulent or incorrectly completed electronic instructions.

To the maximum extent permitted by law, including in the event of fraud, you hereby irrevocably release Betashares from, and indemnify Betashares against, all losses and liabilities whatsoever arising from Betashares:

- acting in accordance with any instructions received electronically bearing your portfolio number and/or other information provided to validate the instructions: or
- declining to act on instructions for any reason including because it was unable to validate those instructions to the satisfaction of Betashares.

Account operating authority

If your account operation requires all signatories to sign you will be required to have all signatories sign this form. You can change the account operating authority at any time by written request signed by all account holders.

Signatures

YOUR REQUEST CANNOT PROCEED IF THIS SECTION IS NOT SIGNED

Investor 1 / Organisation signatory 1	Investor 2 / Organisation signatory 2				
Full customer name (given name, middle name(s), family name)	Full customer name (given name, middle name(s), family name)				
Signature (Individual or person authorised to sign on behalf of the organisation)	Signature (Individual or person authorised to sign on behalf of the organisation)				
If signing an habalf of an arganization places are side your title / position	If signing on bob off of an aggregation places are side your title (position				
If signing on behalf of an organisation, please provide your title / position Director Company Secretary Trustee Attorney	If signing on behalf of an organisation, please provide your title / position Director Company Secretary Trustee Attorney				
Sole Director Other, please specify:	☐ Sole Director ☐ Other, please specify:				
Date	Date				

- In the case of corporate signatories, two directors or a director and a company secretary must sign unless you are a sole director and sole secretary.
- If signed under a power of attorney, a certified copy of the power of attorney must be provided (unless already provided).

The information in this form is collected by Betashares Capital Limited.

You can return the completed form to:

Betashares Capital Limited C/- Citi Unit Registry GPO Box 764 Melbourne VIC 3001

Fax number: 1300 114 365

For all queries, please contact 1300 487 577