

Application Booklet

Completing the Application Form

A completed application is an instruction to invest in the Nuveen Churchill Private Credit Income Fund . This application form relates to the Product Disclosure Statement dated 03 September 2024 ('PDS') issued by Channel Investment Management Limited ABN 163 234 240 AFSL 439007 ('CIML' or 'Responsible Entity'). Please read the PDS in full before completing this Application Form.

Incomplete applications

Application monies accompanying an incomplete application will be retained in a trust account pending receipt of the required information. Interest earned on these application monies will form part of the Fund. Units will not be issued as a result of the interest earned.

Tax File Number

Investors have the choice of whether or not to quote their Tax File Number (TFN) when opening a Fund account. The investor does not have to quote a TFN, but it is a requirement of relevant taxation laws that CIML will withhold tax (plus Medicare levy) from income distributions to the investor if they have not quoted their TFN or provided appropriate exemption information. Collection of TFN information is authorised, and its use and disclosure are strictly regulated by, taxation and privacy laws. If you are exempt from quoting a TFN, please quote the equivalent ATO code in the TFN space provided (e.g. Aged pension is 444 - 444 - 441).

Additional applications

Additional investments can be made at any time by sending a completed additional unit application form, together with your electronic funds transfer (EFT) confirmation. It is not necessary for you to complete another Application Form. A copy of the additional unit application form is located at the back of this Application Booklet.

Submitting the Application Form

Apex Fund Services Attn: Unit Registry GPO Box 4968 Sydney, NSW, 2001

Need help completing the Application Form?

Contact Apex T: 1300 133 451

E: registry@apexgroup.com

Power of Attorney

If signing under a power of attorney, you are certifying that the power of attorney has not been revoked (a certified copy of power of attorney must be submitted with this application unless it has already been sighted). For the purposes of antimoney laundering and counter- terrorism laws, the attorney must complete the same identification requirements as an individual (see PART F - Section A).

Anti-Money Laundering/Counter-Terrorism Financing

Under anti-money laundering and counter-terrorism financing laws, we are required to collect and verify certain information about investors including, if appropriate, the beneficial owners of investors. Without this information, we may refuse to process the application until the requested information has been received or refuse to accept the application altogether. We may also refuse to process a transaction in relation to your investments, or delay or block or refuse a transaction, where we have reasonable grounds for believing that the transaction will breach relevant laws.

Wholesale Investor

If you are applying to invest \$500,000 or more, you will automatically be deemed a wholesale investor and no additional documentation is required.

If you are an Australian investor investing less than \$500,000, additional documentation will be required to certify that you are a wholesale investor. Provided you are not acquiring the product in connection with a business, a current qualified accountant's certificate is required. It must be issued within the preceding 2 years, stating that you have either net assets of least A \$2.5 million (which may include the net assets of a company or trust controlled by you) or gross income for each of the last two financial years of at least A\$250,000 (which may include the gross income of a company or trust controlled by you). Refer to PART E on page 12 for a Wholesale Investor Certificate template.

**NOTE: If you are a New Zealand investor, please contact Apex Fund Services Pty Ltd for more information on the requirements for wholesale investor certification.

Politically Exposed Persons (PEP)

Under anti-money laundering and counter terrorism laws, we are required to ask you whether you are a PEP meaning an individual:

- who holds a prominent public position or function in a government body or an international organisation, including:
 - a. Head of State or head of a country or government;
 - government minister or equivalent senior politician; or
 - c. senior government official; or
 - d. Judge of the High Court of Australia, the Federal Court of Australia or a Supreme Court of a State or Territory, or a Judge of a court equivalent seniority in a foreign country or international organisation; or
 - governor of a central bank or any other position that has comparable influence to the Governor of the Reserve Bank of Australia; or
 - f. senior foreign representative, ambassador, or high commissioner; or

- g. high-ranking member of the armed forces; or
- board chair, chief executive, or chief financial officer of, or any other position that has comparable influence in, any State enterprise or international organisation; and
- 2. an immediate family member of a person referred to in paragraph (1), including:
 - a. a spouse; or
 - b. a de facto partner; or
 - c. a child and a child's spouse or de factor partner; or
 - d. a parent; and
- a close associate of a person referred to in paragraph (1), which means any individual who is known (having regard to information that is public or readily available) to have:
 - a. joint beneficial ownership of a legal entity or legal arrangement with a person referred to in paragraph (1); or
 - b. sole benefit of a person described in paragraph (1).

Privacy

CIML has a Board approved privacy policy. We collect and manage your personal information in accordance with this policy, the Privacy Act 1998 (Cth) and the Australian Privacy Principles ('APP').

CIML may collect personal information from you in the application and any other relevant forms in order to process your application, administer your investment and for other purpose permitted under the Privacy Act 1988 (Cth). Tax, company and anti-money laundering law also require some of the information to be collected in connection with an application. In some cases, we collect personal information from third parties including public sources, our related companies, referrers, brokers, agents, your adviser(s) and our service providers.

If you do not provide us with your relevant personal information, we will not be able to provide you with products or services (such as issuing you units). Privacy laws apply to our handling of personal information and we will collect, use and disclose your personal information in accordance with our privacy policy, which includes details about the following matters:

- the kinds of personal information we collect and hold;
- · how we collect and hold personal information;
- whether collection is required or authorised by law;
- the purposes for which we collect, hold, use and disclose personal information;
- the entities or persons to which personal information is usually disclosed;
- how you may access personal information that we hold about you and seek correction of such information (note that exceptions apply in some circumstances);
- how you may complain about a breach of the APPs, or a registered APP code (if any) that

- binds us, and how we will deal with such a complaint;
- whether we are likely to disclose personal information to overseas recipients and, if so,

the countries in which such recipients are likely to be located if it is practicable for us to specify those countries.

Personal information is unlikely to be disclosed to any third parties overseas.

CIML may also be allowed or obliged to disclose information by law. If an investor has concerns about the completeness or accuracy of the information CIML has about them or would like to access or amend personal information held by CIML, they can contact CIML's Privacy Officer at:

Attention: Privacy Officer

Channel Investment Management Limited

GPO Box 206 Brisbane QLD 4001 Phone: 1800 940 599

Our privacy policy is publicly available at www.channelcapital.com.au or you can obtain a copy free of charge by contacting us.

If you are investing indirectly through an IDPS, we do not collect or hold your personal information in connection with your investment in the Fund. Please contact your IDPS operator for more information about their privacy policy.

Correct Forms Of Registrable Names

An application must be signed in the name(s) of natural persons, companies or other legal entities. At least one name given in full and the surname is required for each natural person.

The name of the beneficiary or any other non-registrable name should be included by way of an account designation, completed as described in the examples of correct forms of registrable names below.

Type of investor	Correct form of Registrable Title
Individual or Joint Applicants Use given names in full Do not use initials	Mr John Alfred Smith and Mrs Mary Anne Smith
Partnerships Use partners' personal names Include the name of the partnership as account designation	Mr John Smith and Mr Michael Smith < John Smith and Son A/C >
Minor (a person under the age of 18) Use the name of the responsible adult Include the name of the minor as account designation	Mr John Smith < John Smith >
Company Use company title Do not use abbreviations	ABC Pty Ltd
Trusts Use trustee(s) personal name(s) or registered company name Include the name of the trust	Mrs Sue Smith < Sue Smith Family A/C >
Deceased Estates Use executor(s) personal name(s) Include the name of the deceased	Ms Jane Smith < Est John Smith A/C >
Association Use office bearer(s) personal name(s) Include the name of the club, etc.	Mr Michael Smith < ABC Tennis Association A/C >
Superannuation Funds Use name of trustees and fund Do not use the name of the fund only	Mr John Henry Smith and Mrs Susan Jane Smith < J & S Smith Super Fund A/C >
Co-operative Use name of co-operative Do not use abbreviations	ABC Co-operative Limited
Government Body Use name of government body	ABC Department or Department of ABC

Application Form checklist

Please complete the sections of the application form that apply to you and then return the signed form with the relevant document(s) to the address provided.

Type of investor	Sections to be Completed in Ap	plication Form	Verification Documentation Required
	PART A	PART B, C, D & E	PARTF
Individual / Joint Applicants	Section 1		Section A
Regulated Trust(e.g. SMSF)- Individual Trustee/s	SMSF)- Sections 1 & 3	Section B	
Regulated Trust(e.g. SMSF)- Corporate Trustee	Sections 2a & 3		Section B
All Other Trust Types – Individual Trustee/s	Sections 1 (trustee and beneficial owners) & 3		Section H
All Other Trust Types – Corporate Trustee	Ensure Part D - Investor	Section H	
Private and Unlisted/ Unlicensed Public Australian Company		Section C	
isted/Licenced Australian Section 2a Company	Declaration is signed by all required applicants	Section E	
Foreign Listed/Licenced Company (Australian Registered)	Sections 2a & 2b	Complete Part E – Wholesale Investor Certificate Declaration (as applicable)	Section D
Foreign Private and Unlisted/ Unlicensed Public Company (Australian registered)	Sections 1 (for trustees and beneficial owners), 2a & 2b		Section F
Foreign Company (not registered in Australia)			Section G
Partnerships	Sections 1 & 4		Contact Apex
Association / Registered Co- operative / Government Body	Sections 1(as applicable) & 5		Contact Apex
Minor / Deceased Estate	Sections 1 (for trustees) & 6		Sections A and J or I (as applicable)

Nuveen Churchill Private Credit Income Fund

APIR: CHN7709AU

CL	.ASS	Α	UN	ITS		
CL	ASS.	А	UN	118		

Please cross boxes where appropriate.	\times

ex Fund Services	

APPLICATION FORM 03 September 2024

PART A	r lease cross boxes where appropriate.	
	Investor 1	Investor 2
Section 1	Mr Mrs Miss Ms Other (e.g. Dr)	Mr Mrs Miss Ms Other (e.g. Dr)
Investor Details	Given Name(s)	Given Name(s)
Individual/Joint/	Surname	Surname
Trustee/Director/ Partner/25% or	Date of Birth	Date of Birth
more Shareholder or Beneficial Owner		
If there are more than (2)	Residential Street Address	Residential Street Address
two Individuals, Partners, 25% or more shareholders or Beneficial Owners,	State Postcode	State Postcode
please print additional pages.	Country	Country
	Are you a Politically Exposed Person (as defined on page 2)	Are you a Politically Exposed Person (as defined on page 2)
	No Yes If yes, please provide details below	No ☐ Yes ☐ If yes, please provide details below
	If you are a beneficial owner or controlling person indicate your role (such as managing director)	If you are a beneficial owner or controlling person indicate your role (such as managing director)
	Are you an Australian resident for taxation purposes?	Are you an Australian resident for taxation purposes?
	Yes No	Yes No
	If yes, please provide your Tax File Number or Exemption Number.	If yes, please provide your Tax File Number or Exemption Number.
	If no, please also complete section 13 of the application form as required.	If no, please also complete section 13 of the application form as required.
Section 2(a)	Name of Company (as registered with ASIC or foreign registration	body)
Company Details		
Private/Public	Tax File Number or Exemption Number	Other Identification Number
	Australian Business Number	
	Registered Address (PO Box NOT acceptable)	Principal Place of Management (if any)
	State Postcode	State Postcode
	Country	Country
	A Private Company A Public Company	
	Other type of Company (please state)	
	For private companies, state the full name of each Director:	
	Director1:	Director 2:
	Director 3:	Director 4:

If there are more directors, provide details on a separate sheet and attach to your application form.

 $Please \ also \ complete \ Section 1 of \ this form for \ any \ shareholders \ with \ ownership \ greater \ than 25\%, \ or \ if \ no \ shareholder \ with \ greater \ than 25\%, \ or \ if \ no \ shareholder \ shareholder \ with \ greater \ than 25\%, \ or \ if \ no \ shareholder \ with \ greater \ shareholder \ with \ greater \ shareholder \ s$ than 25%, individuals who directly or indirectly control (includes exercising control through the capacity to determine decisions about $financial\ or\ operational\ policies;\ or\ by\ means\ of\ arrangements,\ voting\ rights\ of\ 25\%\ or\ more,\ or\ power\ of\ veto) the\ company,\ or\ if\ no\ power\ of\ veto)$ such person exists, for each managing official or director of the Company.

Business Address in Australia (if applicable) Further Information for Foreign Companies Postcode State NOTE: Please also complete Section 1 of the form (attach additional page(s) if necessary) for all directors and/or shareholders who are not provided by the form (attach additional page(s)) and the form (attach additional page(s)) are also attached attachehold an interest of greater than 25%. Country where company was formed, incorporated or registered: If the company is registered by a foreign registration body, the name of the body and any registration number is sued and any registration number is sued as the following the property of tRelevant foreign body: Registration Number: Full name of Trust Details Trust/ Full business name (if any) Superannuation Fund Country where Trust established Tax File Number or Exemption Number Type of Trust (Select one of the following trust types and provide the information requested): Registered management investment scheme Provide Australian Registered Scheme Number (ARSN) Regulated trust (e.g. SMSF) Provide name of regulator (e.g. ASIC, APRA, ATO) Provide the Trust's ABN or registration/licensing details Government superannuation fund Provide name of the legislation establishing the Fund Other trust type Trust description (e.g. Family, unit, charitable, estate) Name of trust beneficiaries or details of the class of beneficiaries: Number of Trustees**: Full Name of Settlor*: * Only required where initial contribution to the trust was greater than \$10,000 (unless settlor is deceased). $\hbox{**} Note: Please \ complete \ Section 1 for each \ Individual \ Trustee \ and \ each \ beneficiary \ of \ the \ trust, or \ complete \ Section 2 for \ a \ Corporate$ Please also complete Section 1 for individuals who directly or indirectly control (see section 2(a) for what constitutes "control") an unregulated trust. Name of Partnership Partnership Details Full registered business name (if any) of Partnership Country where Partnership established NOTE: Please provide the full names and details for each of the Partners in Sections 1, 2, 3 or 4 of the form as required (attach extra page(s) if necessary).

Section 5	Please cross type of Investor					
A	Association Register	Association Registered Co-Operative Government Body				
Association/ Registered Co-	Name of Association/Registered Co-		in the state of th			
operative/Government Body Details						
Body Details	Tax File Number or Exemption Number	er	Other Identification Number			
	Australian Business Number					
	Registered Address					
	Ctata	Postcode	Country			
	State	l osteode	Country			
	Principal place of business/operations	s address (if same as registered	address, please write 'AS ABOVE').			
	State	Postcode	Country			
	Full name of the association's Preside completed by Associations.	ent, Secretary and Treasurer (or	other equivalent officers in each case). This section is only to be			
	Name of President					
	Name of Secretary					
	Name of Treasurer					
	Please complete Section 1 with the ful necessary) and provide ID for one of		dent, Secretary or Treasurer (attach additional page(s) if			
	The Government Body is an entity esta					
	Commonwealth of Australia					
	Oommonwealth of Adotralia					
	State, Territory or foreign cou	untry(if so, name of state, Territ	ory or foreign country)			
Section 6	Please cross type of Investor (if applica	able)				
Minor/Deceased Estate	Please cross type of Investor (if applicable)					
	Account Designation: Minor Designation Name (full name of relevan					
	Social action name (name and or rotoral		A/C>			
	Please provide the full names and details	ls of the relevant Trustee(s) by cor				
PART B						
	Mailing Address		Contact Phone			
Section 7						
Contact Details These details will be			Email			
used for all	State	Postcode				
administration correspondence.	State	Tostcode				
	Country					
By providing your email address(es), you agree	Country					
to receive all						
communications, including transaction						
confirmations,						
statements, reports and other notifications,						
by email.						

Section 8	If you would like someone other than the Contact or your Adviser to be able to enquire about this investment, please provide us with their details here.					
Additional Enquirer	Given Name(s) Surname					
	Date of Birth Company (if applicable)					
Section 9	By completing this section you consent to give your financial adviser access to your account information.					
Adviser Details	Adviser Name Adviser Company (if applicable)					
	Dealer Group Name AFSL No.					
	Adviser Email Adviser Phone					
Section 10 Investment Details	Please note that application funds will not be invested until completed and signed Application Form is received and accepted. Minimum investment amount is \$100,000.					
	Amount					
	PAYMENT DETAILS					
	BSB Account Number Account Name Reference 082 401 940 896 716 Nuveen Churchill Private Credit Income Fund Applications Account in the reference field of your EFT.					
	SOURCE OF FUNDS Please tick the most relevant option.					
	Retirement Savings Sale of Assets Financial Investments					
	Employment Income Inheritance/gift					
	Business Activities Other (provide detail)					
Section 11 Nominated	The following account will be credited for payment of distributions and redemptions (if applicable).					
Account and Distribution	Account Name					
Details	Financial Institution Branch BSB(Branch) Account Number					
	BSB(Branch) Account Number					
	INCOME DISTRIBUTION					
	Please specify how you would like any income distributions from the Fund to be paid. Income is reinvested automatically by the Responsible Entity unless otherwise instructed.					
	Reinvested in the Fund Credit to my/our nominated account					
Section 12 Investor Communication	ANNUAL FINANCIAL STATEMENTS The Fund's Annual Financial Statements are accessible in a cost effective and environmentally friendly manner online on the Fund's website as detailed in the offer document.					
	Please choose an option below if you would like to receive a copy of the Annual Financial Statements:					
	I/We elect to receive Annual Financial Statements via: Email or Printed copy If an option is not selected you will NOT be sent Annual Financial Statements, however you may still view them online on the Fund's website.					
	As an investor in the Fund, you will receive market insights, performance updates and relevant Fund information. You will					
	also receive additional marketing from the investment manager. If you do NOT wish to receive this, please tick here.					

FATCA and CRS -Self-certification Declaration

SMSF: Sections 13 and 14 do not need to be

Information about investors that are foreign tax residents must be reported to the Australian Tax Office (ATO) in accordance with the foreign tax residents must be reported to the Australian Tax Office (ATO) in accordance with the Australian Tax Office (ATO) $international\ tax\ reporting\ standards\ and\ laws\ to\ which\ Australia\ is\ subject.\ These\ include\ the\ OECD\ Common\ Reporting\ Standard$ (CRS) and United States Foreign Account Tax Compliance Act (FATCA). If you require further information on Australia's obligations under CRS or FATCA, please visit the ATO website www.ato.gov.au

Tax Residency rules differ by country. Whether an individual is a tax resident of a particular country is often (but not always) based on their domicile, place of management, principal office or incorporation, the amount of time a person spends in a country, the

ompleted if you are a Regulated Australian Ruper Fund	A TIN is the number assigned by each o	country for the purposes of administering to y Number in the US. If a TIN is not provided providing a TIN.	ax laws. This is the equivalent of a Tax File		
Section 14a Intities (Company, rust, Partnership, association, etc) Please select option 1, 2, or 4 in this Section	Individual 1 Are you a tax resident of another country? No Please provide your name and Tax Identification Number (TIN) below:				
	Country of Tax Residence 1 2 3	Tax Identification Number (TIN)	Reason Code if no TIN provided		
	Individual 2 Are you a tax resident of another country No	rissued with a TIN. does not require the TIN to be disclosed.			
	Country of Tax Residence 1 2 3 Reason A: The country of tax residency Reason B: The individual has not been	Tax Identification Number (TIN) does not issue TINs to tax residents.	Reason Code if no TIN provided		
	Select the appropriate entity type from one of the four options below and provide requested information. 1.				

Section 14a Entities (Company, Trust, Partnership, Association, etc)	2. Public Listed Company, Majo Organisation, Central Bank, 3. A Foreign Charity or an Active reporting period, less than 50 less than 50% of assets heles than 50% of assets heles than 50% of assets heles account Informate If the entity is a Foreign Chare (Country of Tax Residency). 4. Other (Entities that are not property of the state of t	ity located in a Non-Participating CRS Jurison 4b (Country of Tax Residency for Entity) prity Owned Subsidiary of a Public Listed Contain Australian Registered Charity or Decease We Non-Financial Entity (NFE) (Active NFEsta) We of their gross income was passive incomed produced passive incomed produced passive incomed) Es, refer to section VIII in the Annexure of the citor at www.oecd.org) ity or Active NFE, please proceed to section	npany, Governmental Entity, International sed Estate. include entities where, during the previous se(e.g. dividends, interests and royalties) and e OECD 'Standard for Automatic Exchange of
Section 14b Country of Tax Residency for Entity		country of tax residency and tax identificat cable. If a TIN is not provided, please list the ration a TIN. Tax Identification Number (TIN) In tissue TINs to tax residents. and with a TIN.	ion number (TIN). Please include multiple reason(of the of the three reasons specified as Reason Code if no TIN provided
Section 14b.1	For Companies only - Are any of its beneficial owners tax residents of countries other than Australia? Yes - Please complete section 13 for those individuals No For Unregulated Trusts only - Are any of its controlling persons (an individual who directly or indirectly exercises control over the Unregulated Trust, which includes all trustees, settlors, protectors and beneficiaries) tax residents of countries other than Australia? Yes - Please complete section 13 for those individuals No If the Trustee is a company - Are any of the company's controlling persons (an individual who directly or indirectly exercises control over the Trustee is a company, which includes beneficial owners controlling more than 25% of the share in the company or senior managing officials) tax residents of countries other than Australia? Yes - Please complete section 13 for those individuals No		

Investor Declaration

By completing and signing the Application Form, the investor:

- a. I/We have read and understood the PDS to which this application relates and agree to be bound by the provisions of the Fund Constitution;
- b. I/We have received personally a complete and unaltered PDS prior to completing the Application Form and declare that all the details given in this Application Form are true and correct;
- c. I/We confirm that I/we are in compliance with all relevant laws and regulations (including, without limitation, the requirements of the Corporations Act) and will not cease to be in compliance if I/we are allocated Units;
- d. I/We authorise the use of the TFN information provided on the Application Form in respect to my/our investment;
- e. I/We acknowledge that neither CIML, nor its associates, guarantee the capital invested by investors or the performance of the specific investments of the Fund;
- f. I/We acknowledge that the provision of the products available through the Fund should not be taken as the giving of investment advice by CIML, as CIML is not aware of the investor's investment objectives, financial position or particular needs:
- g. I/We acknowledge that I/we are responsible for ensuring that the information on the Application Form is complete and correct;
- h. I/We have such knowledge and experience in financial and business matters that I/we are capable of evaluating the merits and risks of a purchase of the Units and I/we acknowledge that an investment in the Fund involves a degree of risk;
- i. I/We have the financial ability to bear the economic risk of the investment in the Fund;
- i. I/We have had access to all information that I/we believe is necessary or appropriate in connection with this application for Units. I/We acknowledge and agree that the only information and representations provided by CIML are those contained in the PDS to which this Application Form relates;
- k. I/We have made and relied upon my/our own assessment of the Fund and have conducted my/our own investigation with respect to the Application and the Fund including, without limitation, the particular tax consequences of subscribing, owning or disposing of the Units in light of my/our particular situation as well as any consequences arising under the laws of any other taxing jurisdiction;
- I. Except to the extent that liability cannot by law be excluded, I/we acknowledge that none of the directors, officers, employees or advisers of CIML or the Fund, or any of their respective related bodies corporate, accept any responsibility in relation to the Application;
- m. I/We acknowledge that the Fund, CIML and its affiliates will rely upon the truth and accuracy of the foregoing acknowledgments, representations, warranties and agreements. I/We indemnify the Fund, CIML and their affiliates against any loss, damage or costs incurred and arising out of or in relation to any breach by me/us of the acknowledgments, representations, warranties and agreements;
- n. I/We agree that CIML, may:
 - i) require me/us to provide any additional documentation or other information and perform any acts to enable compliance with any laws relating to anti-money laundering and counter terrorism financing ('AML') or any other law;
 - ii) at its absolute discretion and without notice to me/us, take any action it considers appropriate, including blocking or delaying transactions on my/our account or refuse to provide services to me/us to comply with any law relating to AML or any other law; and
 - iii) in its absolute discretion and without notice to me/us, report any or any proposed transaction or activity to anybody authorised to accept such reports relating to AML or any other law;
- $o. \quad I/We certify that if we are signing under a power of attorney, the power of attorney has not been revoked; and if the power of attorney has not been revoked has not been revoked his power of attorney his power$
- p. I/we have read and understood CIML's privacy collection statement in this Application Booklet and understand that a copy of the Privacy Policy is publicly available at www.channelcapital.com.au
- q. I/we consent to my/our personal information being collected, held, used and disclosed in accordance with the Privacy Policy.
- r. I/we consent to CIML disclosing this information to my/our financial adviser (named in this form). Where the financial adviser no longer acts on my/our behalf, I/we will notify CIML of the change.
- s. I/We confirm that I/we are a wholesale client (as defined in section 761G of the Corporations Act).

Name 1	
Capacity	Signature
(i.e. Individual/Trustee/Director/Secretary/Partner/ Authorised Signatory)	Date / / / /
Name 2	
Capacity	Signature
(i.e. Individual/Trustee/Director/Secretary/Partner/ Authorised Signatory)	Date / / / / / / / / / / / / / / / / / / /

Wholesale or Professional Investor Certificate

If you are investing less than \$500,000 you will need to get a "Qualified accountant" (defined below) to complete this form. Alternatively, submit an equivalent Qualified accountant's certificate to satisfy the trustee that you are a wholesale investor

This certificate is issued for the purposes of Section 708(8) and Section 761G of the Corporations Act 2001.

I hereby certify that the following person/persons has:

Please show the name of each person this applies to (print full legal name of the person – individual or company): Individual(s)

1	2
3	4
Company	
Net assets** of at least AUD \$2.5 million; or	
A gross income ** for each of the last 2 financial years of at least	AUD\$250,000 a year
Controlled Companies or Trusts***	
It is confirmed that for the purposes of the Corporations Act, th companies or trusts:	at the above-named person/persons control the following
Please list the name of the entities (include details of trusts for which the entity acts as a trustee)	
I confirm that I am a qualified accountant as defined in section 8	88B of the Corporations Act.
I belong to (name of the professional body)	
I comply with this body's continuing professional education requ	uirements.
Qualified Accountant* to sign (defined below):	_
Name	Signature
	Date / / / / / / / / / / / / / / / / / / /

- * "Qualified accountant" means a member of a professional body that is approved by ASIC in writing for the purpose of the definition. ASIC has indicated that it will approve an member of:
- (a) The Australian Society of Certified Practicing Accountants ("ASPCA"), who is entitled to use post-nominals "CPA" or "FCPA" and is subject to and complies with the ICAA's continuing professional development requirements;
- (b) The Institute of Chartered Accountants in Australia ("the ICAA"), who is entitled to use the post-nominals of "CA", "ACA", or "FCA", and is subject to and complies with the ICAA's continuing professional education requirements; or
- (c) The National Institute of Accountants ("the NIA"), who is entitled to use the post-nominals "MNIA" or "FNIA", and is subject to and complies with NIA's continuing professional education requirements.
- ** In calculating the net assets or gross income, the investor may include the net assets or gross income (as relevant) of any company or trust the investor controls (see Corporations Regulation 7.6.02AC).
- *** Where the investor is a company or trust controlled by someone who has certificate from a qualified accountant, the investor may be considered wholesale (see Corporations Regulation 7.6.02AB).

Section A

Individuals/Joint Applicants

Minimum Identification Required

For each Investor please provide:

- $a) \quad \text{an original or certified copy of a valid Driver's Licence} \\ (\text{Australian State or Territory}, \text{ or Foreign Country equivalent}) \\ \text{with} \\ \\$ photograph; or
- b) an original or certified copy of a passport issued by Australian Commonwealth or expired passport which has not been cancelled and was current within the preceding two years; or
- c) Passport or similar document issued for the purpose of international travel that contains a photograph and signature of the person

	and is issued by a foreign government, UN or UN Agency, with English translation provided by an accredited translator if not in English;
Or	
d) B (i)	oth: an original or certified copy of a valid primary I.D. document
	National Identity Card with a photograph and signature issued by Australian Commonwealth, State or Territory; or
	Foreign National Identity Card with a photograph and signature issued by a foreign government, UN or UN Agency, with English translation provided by an accredited translator, if not in English; or
	Birth Certificate or birth extract issued by Australian State or Territory; or
	Birth Certificate issued by foreign government, UN or UN Agency, with English translation provided by an accredited translato if not in English; or
	Citizenship Certificate issued by Commonwealth government; or
	Citizenship Certificate issued by foreign government, UN or UN Agency, with English translation provided by an accredited translator if not in English; or
	Pension card issued by Centrelink;
And	
(11)	an original or certified copy of a valid secondary I.D. document:
	notice issued to an individual by Centrelink within preceding 12 months which records the provision of financial benefits to an individual and the individual's name and residential address; or
	notice of a foreign welfare department equivalent within preceding 12 months which records the provision of financial benefit to an individual and the individual's name and residential address; or
	notice issued to an individual by the ATO or relevant foreign Taxation authority within the preceding 12 months which records the name and residential address of the individual; or
	notice issued to an individual by a local government body or utilities provider within preceding three months which records the provision of services to that residential address or that individual; or
	For persons under 18, a notice issued by a school principal within the preceding three months containing the name of the person and his or her residential address and recording the period of time that the person attended the school.
	Managed Superannuation Fund, registered managed investment schemes, regulated trusts and Government erannuation Fund copies of:
	a search of the relevant regulator e.g.: ASIC, ATO, APRA or Trust Deed

Section B

Regulated Trust

Section C Private and Unlisted/ Unlicensed Public Australian Companies	Minimum Identification Required Original or certified copies of: a search of the relevant ASIC database, or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); and where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied. for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.
Section D Foreign Listed / Licensed Company (Australian Registered)	Australian Registered Foreign Company Original or certified copies of: a search of the relevant ASIC database, search of the licence or other records of the relevant regulator, other appropriate document(s) including reliable independent electronic data(e.g. Dun & Bradstreet report); and where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied. for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.
Section E Listed / Licensed Australian Companies	Original or certified copies of: a search of the relevant ASIC database or relevant stock exchange or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report).
Section F Foreign Private and Unlisted / Unlicensed Public Companies (Australian Registered)	Australian Registered Foreign Company Original or certified copies of: a search of the relevant ASIC or other government database, a search of the relevant foreign stock exchange, a search of the licence or other records of the relevant regulator or other appropriate document(s) including reliable independent electronic data (e.g. Dun & Bradstreet report); or Certificate of Incorporation or recent extract of public company register or document issued by the foreign government (including a registration certificate).
Section G Foreign Companies (not registered in Australia)	Unregistered Foreign Company Original or certified copies of: Foreign registration certificate, Certificate of Incorporation, recent extract of company register: or other appropriate document(s) including a search of the relevant government database, a search of the relevant stock exchange, a search of the licence or other records of the relevant regulator, or other appropriate document(s) including reliable independent electronic data(e.g. Dun & Bradstreet report); and where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied. for each Signatory, the identification requirements set out in Section 'A' must also be satisfied.
Section H Other Trust Types	Original or certified copies of: the trust deed; if the Settler of the Trust has made a material asset contribution of >\$10,000 and is still living, the identification requirements set out in Section 'A' must be satisfied; and where a beneficial owner has 25% or more of issued capital, the identification requirements set out in Section 'A' must also be satisfied. And In respect of one of the trustees: if the trustee is an individual, then ID required as per the individual requirements as per Section 'A'; or if the trustee is a company, then ID required as per the company requirements as per Section C', 'D', 'E', 'F' or 'G'.
Section I Deceased Estate	Identification as per Section 'A' for trustee; and Original or certified copies of: last Will and Testament of deceased; and death certificate; or Grant of Probate.

Section J Minor	Minimum Identification Required Identification as per Section 'A' for trustee; and Identification as per Section 'A' for minor.
	CATEGORY OF ACCEPTABLE REFEREES Certified Copy means a document that has been certified as a true copy of an original document by one of the following persons:
	 A person who, under a law in force in a State or Territory, is currently licensed or registered to practice in an occupation listed in Part 1 of Schedule 2 of the Statutory Declarations Regulations 2018;
	2. A person who is enrolled on the roll of the Supreme Court of a State or Territory, or the High Court of Australia, as a legal practitioner (however described);
	3. A person listed in Part 2 of Schedule 2 of the Statutory Declarations Regulations 2018. For the purposes of these Rules, where Part 2 uses the term '5 or more years of continuous service'; this should be read as '2 or more years of continuous service';
	4. An officer with, or authorised representative of, a holder of an Australian financial services licence, having 2 or more years of continuous service with one or more licensees;
	5. An officer with, or a credit representative of, a holder of an Australian credit licence, having 2 or more years of continuous service with one or more licensees; and
	6. A person in a foreign country who is authorised by law in that jurisdiction to administer oaths or affirmations or to authenticate documents.
	The Statutory Declaration Regulations 2018 are accessible through the following website: www.legislation.gov.au.

Nuveen Churchill Private Credit Income Fund

ADDITIONAL UNIT APPLICATION FORM

Channel Investment Management Limited ACN: 163 234 240 AFSL:439007

CLASS A UNITS

APIR: CHN7709AU

Please complete this form using BLACK INK and write clearly within the boxes in CAPITAL LETTERS.

If you require any information regarding your investments, please contact Apex on 1300 133 451.

This additional unit application form is for existing Investors in the Nuveen Churchill Private Credit Income Fund ('the Fund') who wish to apply for additional units in the Fund. The additional investment amount will be added to your existing investment in the Fund.

You should read the PDS to which this application relates issued by Channel Investment Management Limited ACN 163 234 240 AFSL 439007 before completing this additional unit application form.

Section 1. Investor Identification							
Investor Reference Number							
Full name(s) of Registered Unitholder(s)							
Registered Address							
Suburb	State		Postcode				
Guburb	State		1 Ostcode				
Section 2. Investment Amount							
Additional Investment Amount:	\$						
SOURCE OF FUNDS - Please tick the ma							
Retirement Savings							
Business Activities	Other (provide detail)						
Section 3. Declaration And Autho							
I/We have read and understood the PDS to which this application relates and the declarations conditions and acknowledgements contained under Part D 'Investor Declaration' of the Application Form and agree that they are incorporated in this declaration. I/We agree, acknowledge and accept them and declare that all the details given in this application are true and correct. I/We have received personally a complete and unaltered PDS prior to completing the Additional Unit Application Form. I/We certify that if we are signing under a power of attorney the power of attorney has not been revoked. Investor 1 Investor 2							
Date Name	/ / /	Date Name					
Capacity(i.e. Individual/Trustee/Directo	r/Secretary/Partner/Authorised Signator	ry) Capacity(i.e. Individual/Trustee/Direction	ctor/Secretary/Partner/Authorised Signator				
Castian / Daymant Dataila							
Section 4. Payment Details BSB	Account Number	Account Name	Reference				
082 401	940 896 716	Nuveen Churchill Private Credit Income Fund Applications Account	Please include your Investor Name in the reference field of your EFT.				
Return form							
			@				

Call:

1300 133 451

If you have any questions in relation to this form, please call **Apex Fund Services** on:

Apex Fund Services
Attn: Unit Registry

Post to:

GPO Box 4968, Sydney NSW, 2001

Email to:

registry@apexgroup.com