

Entity Account Application Please do not use this form for IRA accounts

Mail to: Ecofin Tax-Exempt Private Credit Fund, Inc. c/o U.S. Bank Global Fund Services PO Box 701 Milwaukee, WI 53201-0701

Overnight Express Mail to: Ecofin Tax-Exempt Private Credit Fund, Inc. c/o U.S. Bank Global Fund Services 615 E. Michigan St., FL3

Milwaukee, WI 53202-5207

>> In compliance with the USA PATRIOT Act, all financial institutions (including mutual funds) are required to obtain, verify and record the following information for all registered owners or others who may be authorized to act on an account: full name, date of birth, Social Security number and permanent street address. Corporate, trust, and other entity accounts require additional documentation. This information will be used to verify your true identity. We will return your application if any of this information is missing, and we may request additional information from you for verification purposes. In the rare event that we are unable to verify your identity, the Fund reserves the right to redeem your account at the current day's net asset value.

1 Investor Info	rmation Select one	
☐ C Corporation☐ Partnership	NAME OF CORPORATION / PARTNERSHIP	STATE OF ORGANIZATION
Limited Liability Company		STATE OF ORGANIZATION
☐ S Corporation☐ Other Entity	NAME(S) OF AUTHORIZED SIGNER(S)	Check here if you are a government entity or affiliated with a government entity.
	TAX ID NUMBER You must supply documentation to substantiate the existen Partnership Agreement, or other official documents.)	ce of your organization. (e.g., Articles of Incorporation/Formation/Organization,

2 Beneficial Owner Information

Please complete the table below for each individual, if any, who directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise, owns 25% or more of the equity interests of the Legal Entity listed in Investor Information section. If no individuals meet this criteria, please leave the table blank to certify this requirement does not apply for the Legal Entity.

Please note that if the Legal Entity is owned by another Entity, only natural persons should be listed within the table (ex. if ABC Corp. is 50% owned by 123 Corp. and 123 Corp. is 50% owned by John Doe, John Doe should be listed as he is a 25% Beneficial Owner of ABC Corp.).

For Foreign Persons: An alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard can be provided in lieu of a passport number. A copy of the individual's passport, alien identification card, or other government-issued document must be included with the form.

	Name	Date of Birth	Address (Residential or Business Street Address)	Social Security Number (For U.S. Persons)	Passport Number and Country of Issuance (For Foreign Persons)
1					
2					
3					
4					

3 Controller Information

Please complete the table below with the requested information for <u>one</u> individual with significant responsibility for managing the Legal Entity listed in Investor Information section, such as an executive officer or senior manager (ex. Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer), or any other individual who regularly performs similar functions (a beneficial owner named in Beneficial Owner Information section can be listed here if appropriate).

For a Foreign Person: An alien identification card number, or number and country of issuance of any other government-issued document evidencing nationality or residence and bearing a photograph or similar safeguard can be provided in lieu of a passport number. A copy of the individual's passport, alien identification card, or other government-issued document must be included with the form.

Name	Date of Birth	Address (Residential or Business Street Address)	Social Security Number (For U.S. Person)	Passport Number and Country of Issuance (For Foreign Person)

4 Permanent Street Address

Residential Address or Principal F Boxes are not allowed.	Place of Business - Foreign a	addresses and PO	☐ Mailing Address If completed, this address will checks and required mailings	* (if different from Perr I be used as the Address of Reco . Foreign addresses are not allow	manent Address) and for all statements, wed.
STREET		APT/SUITE	STREET		APT/SUITE
CITY	STATE	ZIP CODE			7/0.0005
DAYTIME PHONE NUMBER	EVENING PHONE	NUMBER	CITY * A PO Box may be used as to	STATE he mailing address.	ZIP CODE
E-MAIL ADDRESS Duplicate Statement Complete only if you wish someon duplicate statements.	nt #1 ne other than the account ov	vner(s) to receive	Duplicate Staten Complete only if you wish sor duplicate statements.	nent #2 meone other than the account ow	mer(s) to receive
COMPANY NAME			COMPANY NAME		
NAME			NAME		
STREET		APT/SUITE	STREET		APT/SUITE
CITY	STATE	ZIP CODE	CITY	STATE	ZIP CODE

5 Investment and Distribution	Options				
 □ By check: Make check payable to Note: All checks must be in U.S. Dollar. The Fund does not accept post dated third party checks, Treasury checks, color by wire: Call 855-822-3863. Note: A completed application is required. 	rs drawn on a domestic bank. The checks or any conditional order redit card checks, traveler's checks.	ne Fund will not acc or payment. To pre	vent check frau	ıd, the Fund	will not accept
	Investment Amount \$2,500 Minimum	Capital (Reinvest If nothing is selected	Cash* F	Divider Reinvest d dividends wil	Cash*
☐ Ecofin Tax-Exempt Private Credit Fund, Inc. 4240					
*If cash distribution should be paid,	please select one: ☐ Chec	k to Address of R	Valid Voided	Check or Sa	of Record vings Deposit mation section
6 Cost Basis Method					
The Cost Basis Method you elect applies existing and future accounts you may est in which shares are redeemed and how you Revenue Service (IRS). Please consult situation. If you do not elect a Cost Basis Primary Method (Select only one) Average Cost – averages the pure First In, First Out – oldest shares Last In, First Out – newest shares Low Cost – least expensive shares High Cost – most expensive shares Specific Lot Identification – you you elect a Secondary Method beld a redemption are unavailable.) Secondary Method – applies only if Secondary Method – applies only if Secondary Method – Low Cost High Cost Low Cost High Cost Low Cost High Cost	ablish, unless otherwise noted. our cost basis information is calce tyour tax advisor to determine the Method, your account will defaut the chase price of acquired shares are redeemed first are shares with losses prior to shares must specify the share lots to bow, which will be used for system as specific Lot Identification was elected.	The Cost Basis Metulated and subsequence which Cost Built to Average Cost with gains and shope sold at the time eatic redemptions at as the Primary Meth	ethod you sele uently reported asis Method t. ort-term shares of a redemption in the event	ct will deterrified to you and best suits you are sprior to long on (This me the lots you	mine the order to the Internal your specific g-term shares thod requires

7 Telephone Options

You automatically have the ability to make telephone purchases* per the prospectus, unless you specifically decline below. See the prospectus for minimum and maximum amounts.

* You must provide bank instructions and a voided check or savings deposit slip in the Bank Information section.

Please check the box below if you wish to decline these options. If the options are not declined, you are acknowledging acceptance of these options.

☐ I decline telephone transaction privileges.

Should you wish to add the options at a later date, a signature guarantee may be required. Please refer to the prospectus or call our shareholder services department for more information.

8 Automatic Investment Plan (AIP)

Your signed application must be received up to 7 business days prior to initial transaction.

If you choose this option, funds will be automatically transferred from your bank account. Please attach a voided check or savings deposit slip to the Bank Information section of this application. We are unable to debit mutual fund or pass-through ("for further credit") accounts.

Draw money for my AIP (c	heck o	ne):	ncv will default to monthly.	
\$100 minimum			,	
☐ Ecofin Tax-Exempt Private	Credit 4240			
Fund, Inc.	4240	AMOUNT PER DRAW	AIP START MONTH	AIP START DAY

Please keep in mind that:

- There is a fee if the automatic purchase cannot be made (assessed by redeeming shares from your account).
- Participation in the plan will be terminated upon redemption of all shares.

9 Bank Information

If you selected any options which require banking information, please attach a voided check or preprinted savings deposit slip. We are unable to debit or credit mutual fund or pass-through ("for further credit") accounts.

Please contact your financial institution to determine if it participates in the Automated Clearing House System (ACH).

John Doe Jane Doe 123 Main St. Anytown, USA 12345		53289
Pay to the order of	4010	\$ DOLLARS
Memo	Signed	

10 Signature and Certification Required by the Internal Revenue Service

- ✓ I have received and understand the prospectus for the Ecofin Tax-Exempt Private Credit Fund, Inc. (the "Fund"). I understand the Fund's investment objectives and policies and agree to be bound by the terms of the prospectus. Before I request an exchange, I will obtain the current prospectus for each Fund. I acknowledge and consent to the householding (i.e., consolidation of mailings) of regulatory documents such as prospectuses, shareholder reports, proxy statements, and other similar documents. I may contact the Fund to revoke my consent. I agree to notify the Fund of any errors or discrepancies within 45 days after the date of the statement confirming a transaction. The statement will be deemed to be correct, and the Fund and its transfer agent shall not be liable, if I fail to notify the Fund within such time period. I certify that I am of legal age and have the legal capacity to make this purchase.
- ✓ The Fund, its transfer agent, and any of their respective agents or affiliates will not be responsible for banking system delays beyond their control. By completing the banking sections of this application, I authorize my bank to honor all entries to my bank account initiated through U.S. Bank, N.A., on behalf of the applicable Fund. The Fund, its transfer agent, and any of their respective agents or affiliates will not be liable for acting upon instructions believed to be genuine and in accordance with the procedures described in the prospectus or the rules of the Automated Clearing House. When AIP or Telephone Purchase transactions are presented, sufficient funds must be in my account to pay them. I agree that my bank's treatment and rights to respect each entry shall be the same as if it were signed by me personally. I agree that if any such entries are not honored with good or sufficient cause, my bank shall be under no liability whatsoever. I further agree that any such authorization, unless previously terminated by my bank in writing, is to remain in effect until the Fund's transfer agent receives and has had reasonable amount of time to act upon a written notice of revocation.
- ✓ I understand that my mutual fund account assets may be transferred to my state of residence if no activity occurs within my account during the inactivity period specified in my State's abandoned property laws.
- ✓ Under penalty of perjury, I certify that (1) the Social Security or taxpayer identification number shown on this form is my correct taxpayer identification number, and (2) I am not subject to backup withholding as a result of either being exempt from backup withholding, not being notified by the IRS of a failure to report all interest or dividends, or the IRS has notified me that I am no longer subject to backup withholding, (3) I am a U.S. person (including a U.S. resident alien), and (4) I am exempt from FATCA reporting. (Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding due to a failure to report all interest and dividends.)

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

✓ I hereby certify that to the best of my knowledge, the information provided about me, and the information provided about the beneficial owner(s) and/or the individual with control over the legal entity is complete and correct.

RINTED NAME OF AUTHORIZED SIGNER IGNATURE OF AUTHORIZED SIGNER	DATE (MM/DD/YYYY)
1 Dealer Information	
DEALER NAME DEALER'S ID BRANCH ID DEALER HEAD OFFICE INFORMATION:	REPRESENTATIVE'S LAST NAME FIRST NAME M.I. REPRESENTATIVE'S ID REPRESENTATIVE BRANCH OFFICE INFORMATION:
DDRESS	ADDRESS CODE
ITY/STATE/ZIP ELEPHONE NUMBER	CITY/STATE/ZIP TELEPHONE NUMBER
Before you mail, have you:	
 □ Completed all USA PATRIOT Act required inf − Tax ID Number in Investor Information sect − Permanent street address in Permanent St □ Enclosed your personal check made payable 	ion? if applicable? reet Address section? □ Signed your application in Signature section?

For additional information please call toll-free 855-822-3863 or visit us on the web at www.tortoiseecofin.com

Tax-Exempt Private Credit Fund, Inc.?

Beneficial Ownership Exclusions and Exemptions

Exclusions from the Definition of Legal Entity Customer:

The Rule excludes from the definition of legal entity customer certain entities that are subject to Federal or State regulations and for which information about their beneficial ownership and management is available from the Federal or State agencies, such as:

- Financial institutions regulated by a Federal functional regulator or a bank regulated by a State bank regulator;
- A department or agency of the United States, of any State, or of any political subdivision of a State;
- Any entity established under the laws of the United States, or any State, or of any political subdivision of any State, or under an interstate compact;
- Any entity (other than a bank) whose common stock or analogous equity interests are listed on the New York, American, or NASDAQ stock exchange;
- Any entity organized under the laws of the United States or of any State at least 51% of whose common stock or analogous equity interests are held by a listed entity;
- Issuers of securities registered under section 12 of the Securities Exchange Act of 1934 (SEA) or that is required to file reports under 15(d) of that Act;
- An investment company, as defined in section 3 of the Investment Company Act of 1940, registered with the U.S. Securities and Exchange Commission (SEC);
- An SEC-registered investment adviser, as defined in section 202(a)(11) of the Investment Advisers Act of 1940;
- An exchange or clearing agency, as defined in section 3 of the SEA, registered under section 6 or 17A of that Act;
- Any other entity registered with the SEC under the SEA;
- A registered entity, commodity pool operator, commodity trading advisor, retail foreign exchange dealer, swap dealer, or major swap
 participant, defined in section 1a of the Commodity Exchange Act, registered with the Commodity Futures Trading Commission;
- A public accounting firm registered under section 102 of the Sarbanes-Oxley Act.
- A bank holding company, as defined in section 2 of the Bank Holding Company Act of 1956 (12 USC 1841) or savings and loan holding company, as defined in section 10(n) of the Home Owners' Loan Act (12 USC 1467a(n));
- A pooled investment vehicle operated or advised by a financial institution excluded from the definition of legal entity customer under the final CDD rule;
- An insurance company regulated by a State;
- A financial market utility designated by the Financial Stability Oversight Council under Title VIII of the Dodd-Frank Wall Street Reform and Customer Protection Act of 2010;
- A foreign financial institution established in a jurisdiction where the regulator of such institution maintains beneficial ownership information regarding such institution;
- A non-U.S. governmental department, agency or political subdivision that engages only in governmental rather than commercial activities; and
- Any legal entity only to the extent that it opens a private banking account subject to 31 CFR 1010.620.

Exemptions from the Ownership Prong:

Certain legal entity customers are subject only to the control prong of the beneficial ownership requirement, including:

- A pooled investment vehicle operated or advised by a financial institution not excluded under paragraph 31 CFR 1010.230(e)(2); and
- Any legal entity that is established as a nonprofit corporation or similar entity and has filed its organizational documents with the appropriate state authority as necessary.

Page 6 of 6 01/2023