

Return via standard mail to:

Corporate Capital Trust PO Box 219984 Kansas City, MO 64121-9984 Return via Overnight Delivery: Corporate Capital Trust 430 W.7th Street, Ste. 219984 Kansas Citv. MO 64105-1407 **Customer Service**Toll-Free (844) 857-4557
Fax (844) 871-9770

Custodian Change Form

one	Resigning Custodian	n Current I	Registration I	nformatio	n				
	Assignor Name				Investor (Beneficial Owner) Name				
	Investor Account Number				Social Sec	Social Security Number/TIN			
Medallion Stamp Signature Guarantee	Product Name					Number	Number of Units/Shares		
	Product Name					Number	Number of Units/Shares		
	The Assignor hereby assigns to the Assignee 100% of the Assignor's right, title and interest in the Product(s) described herein. This hereby constitutes and appoints the said General Partner(s)/Company to transfer the above-referenced assets/interests on the books of record with full power of substitution in the premises.								
	Authorized Custodian Signature					Date	Date		
two	New Custodian Reg	istration							
lote: By signing this form, you uthorize any pending redemption	Assignee Name Assignee Ta					Гах I.D. Numb	x I.D. Number		
equests to remain on the account or future payment unless a request	Assignee Address						Assignee Phone Number		
o cancel/withdrawal is received. Medallion Stamp Signature Guarantee	Investor (Beneficial Owner) Name								
	Investor Account Number					Social Sec	Social Security Number/TIN		
	Investor								
	City State					Zip Code			
	Authorized Custodian Signature					Date	Date		
three	Change of Financial	l Advisor o	r Investor Rep	oresentativ	ve (<i>if applic</i>	able)			
New Broker-Dealer/Financia	al Institution								
New Financial Advisor/Inve	estor Representative	Name(s)	Advisor Nu	mber/Te	am ID				
Mailing Address							- Evý	Ŋ.	
City			State	Zip Co	ode				
Phone Number		Fax					تخدا		