

# **StepStone Private Markets Account Maintenance Form for U.S. Investors**

## RETURN TO Overnight Address:

StepStone Private Markets Attn: UMB Fund Services 235 W. Galena Street Milwaukee, WI 53212

### **U.S. Mailing Address:**

StepStone Private Markets Attn: Transfer Agent P.O. Box 2175 Milwaukee, WI 53201-2175

Completed forms may be sent to the address above or emailed to STEPSTONEDAILYPROCESSING@UMB.COM. Please do not hesitate to contact us at 877-772-7724 for information or assistance.

This form may be used to take the following actions:

#### **SECTION 2**

Change of Address, Phone Number or Email. Limited changes may also be made at www.StepStonePW.com.

#### **SECTION 3**

Name Change. Applicable legal documentation showing the name change, such as a marriage certificate or change of name affidavit, is required with this form.

## **SECTION 4**

Interested Party. Add in interested party or alternative mailing address where duplicate quarterly statements may be sent. This option is for mailing purposes only and does not grant other account access privileges. Custodial accounts require custodial authorization.

#### **SECTION 5**

Change of cost-basis election. Custodial accounts require custodial authorization.

#### SECTION 6

Change of broker/dealer, financial professional or registered investment advisor. Custodial accounts require custodial authorization.

## **SECTION 7**

Change of dividend and/or distribution instructions. Also used to add or change banking instructions. Custodial accounts require custodial authorization. Requests must be received 45 days prior to a distribution record date.

### **SECTION 8**

Investor authorization and signatures. All client signatures are required. If a discretionary account has already been established, the financial professional with discretionary authority may sign on behalf of the investor. If any changes are made in Sections 4-7 for custodial accounts, custodial authorization is required. If making changes in Section 7, a medallion signature guarantee may be required.

## **StepStone Private Markets Account Maintenance Form**

1.	<b>Investment Registration Inform</b>	ation 1	REQUIRED		
Trust	/Corp/Partnership/Other			SSN/Tax Iden	tification Number
Owne	er's Name (first, middle, last)			Social Security	y Number
Joint	Owner's Name (first, middle, last)			Social Security	y Number
StepS	tone Private Markets account number (optional)				
2.	Change of Address and Other C	ontact I	nformation		
New	Physical Address				
City		State			Zip
	M '1' A 11	State			2.10
New	Mailing Address				
City		State			Zip
New	Telephone Number		Email Address		
your oww.S Due to	ay sign up to receive regulatory documents email address, the Fund will send you stepStonePW.com. The email will contain the personal financial nature of the information the site.	ou an en a hyperlin	nail whenever a k to the site mak	n updated do ing it easy to	ocument is posted to access the information.
3.	Name Change				
	able legal documentation showing your nan ired with this form.	ne change,	such as a marriage	certificate of c	change of name affidavit
Form	er Name	ı	New Name		
4.	Interested Party (Custodial accounts r	equire custo	dial authorization)		
telepho	licate quarterly statement may be sent to to one or account access privileges, nor is the ed accounts, please contact the custodian of	is option a	vailable on all ac	counts. For c	
Name	)				
Maili	ng Address	City, St	ate		Zip

## 5. Change of Cost-Basis Election

The Fund has elected the average cost method as the default cost basis method for purposes of this requirement. Investors should consult with their financial and tax professional on the most appropriate method. If a shareholder elects to change the cost accounting method applicable to such shareholder's account from "average cost" to another method, and the shareholder had previously used the average cost methodology with respect to shares repurchased by the fund or otherwise transferred by the shareholder, all existing lots in their account will maintain the average cost-basis accounting methodology. Any shares purchased after the election to change cost accounting method (including shares issued pursuant to the fund's dividend reinvestment plan) may utilize the new cost-basis methodology elected.

FIFO   LOFO   HILT   HIST   LIFO   LILT	age Cost (first in, first out) (lowest in, first out) (highest long term, first out) (last in, first out) (lowest long term, first out)			
_	e of Broker/Dealer, Finance l accounts require custodial authorizat		onal or Registered Inv	estment Adviser
`	<u> </u>			
New Broker/Dea	aler or RIA Firm Name			
New Financial F	Professional or IAR Name			
Mailing Address	3			
City		State		Zip
City		State		Zip
Phone Number			Branch Number	
E 11.11			D (DD	
Email Address			Rep CRD#/IARD#	
	r, financial professional or regis applicable policies and procedures cation program.			
Signature of Investor Rep	Broker/Financial Professional/RIA / Cresentative	Other	Ī	Date
Signature of	Registered Supervisory Principal (if a	pplicable)	Ī	Date

7.	<b>Change of Distribution Instructions</b> (Cu	istodial accounts require custodial authorization)			
	Please select one of the following options and page	yment methods:			
	Reinvest both dividends and capital gains distributions. Client agrees to notify the company in writing at any time if they are no longer considered an Eligible Investor as set forth in the prospectus.  Receive dividends in cash* and reinvest capital gains distributions. Client agrees to notify the company in writing at any time if they are no longer considered an Eligible Investor as set forth in the prospectus.				
	Receive both dividends and capital gains distributions in cash*				
on reco		ends and distributions will be sent via wire to the custodian sinvestment plan for either dividends, capital gains or both nanner, select one:			
	☐ Wire Transfer to the account shown below	☐ Wire transfer to my custodian of record			
	ACH to the account shown below				
		tments only electing cash dividends or distributions) this bank account. If information on voided check differs pided check will be used.			
Bank	Name	Bank Phone Number			
Bank	Address City	State Zip			
Name	e(s) on Bank Account				
	Account Number	ABA Number (available from your bank)			
This is	a: Checking Account** or Savings Account ** this election requires a medallion signature guarantee	** or Brokerage Account			
	Attach an unsigned, voided check in this box.				

## 8. Investor Authorization and Signatures (Custodial accounts require custodial authorization)

The undersigned hereby authorizes and instructs the StepStone Private Markets (the "Fund") to implement the changes indicated on this form on or after the date this form is processed.

For investors electing to participate in the dividend reinvestment plan, the undersigned warrants receipt of the current offering document(s). A copy of the Fund's current offering documents may be obtained by contacting you financial advisor or at www.StepStonePW.com. The undersigned also warrants that they meet the suitability requirements as applicable and they have a duty to promptly notify the fund in writing if, at any time during which they are participating in the dividend reinvestment plan of the fund, they cannot make the representations or warranties set forth in the original subscription agreement.

For investors electing to receive cash dividends or distributions via wire or ACH transfer, the undersigned authorizes the Fund or their respective agents to deposit any dividend or distribution into the account indicated in Section 7. The authority will remain in force until investor(s) notify the Fund in writing to cancel it. In the event the Fund deposits funds erroneously into investor's account, the Fund is authorized to debit the account for the amount of the erroneous deposit. Investor(s) also hereby acknowledge that funds and/or shares in an account may be subject to applicable abandoned property, escheat or similar laws and may be transferred to the appropriate governmental authority in accordance with such laws, including as a result of account inactivity for the period of time specified in such laws or otherwise. None of the Fund, or its agents or any other person shall be liable for any property delivered in good faith to a governmental authority pursuance to applicable abandoned property, escheat or similar laws.

Signatures below indicate investor(s) has read the foregoing and agree to the terms herein. Investor(s) acknowledges that dividends and capital gains distributions made prior to the date upon which this instruction becomes effective will be made in the manner previously provided for and arranged. This instruction supersedes all prior instructions regarding the subject matter thereof.

Signature of Investor, Trustee or Custodian	Date	
Signature of Joint Investor, Trustee or Custodian (if applicable)	Date	
Printed name(s) of Authorized Signer(s) (for verification purposes)		
Printed name(s) of Authorized Signer(s) (for verification purposes)		
Custodian Authorization or Medallion Signature Guarantee (as needed in Section 7)		