ANTARES PRIVATE CREDIT FUND SUPPLEMENT NO. 3 DATED JUNE 11, 2025 TO THE PROSPECTUS DATED FEBRUARY 12, 2025

This prospectus supplement ("Supplement") is part of and should be read in conjunction with the prospectus of Antares Private Credit Fund (the "Company"), dated February 12, 2025, (as supplemented to date, the "Prospectus"). Unless otherwise defined herein, capitalized terms used in this Supplement shall have the same meanings as set forth in the Prospectus.

The purpose of this Supplement is to update the Prospectus.

The following updates to the Prospectus are effective immediately:

The following replaces the paragraph captioned "Kansas" under the "Suitability Standards" section of the Prospectus:

Kansas—The Securities Commissioner of Kansas recommends that investors limit their aggregate investment in our securities and other similar investments to not more than 10% of their liquid net worth.

The following replaces "Appendix A: Form of Subscription Agreement" in the Prospectus in its entirety:

Appendix A

Antares Private Credit Fund | Subscription Agreement

Antares Private Credit Fund

Subscription Agreement

1 Your Investment		
Investment Amount \$		
Investment Type Initial Inve	estment	
Share Class (Must select one)		
□ Class S	☐ Class D	□ Class I
\$2,500 minimum initial investment	\$2,500 minimum initial investment	\$1,000,000 minimum initial investment ¹
2 Form of Ownership		
See Appendix A for supplemental docum	nent requirements by investor type.	
Individual/Joint Accounts	Retirement Accounts	Entity Accounts
☐ Individual	□ IRA	□ Trust
☐ Joint Tenant with Rights of Survivors	ship Roth IRA	☐ C Corporation
☐ Tenants in Common	□ SEP IRA	☐ S Corporation
☐ Community Property	☐ Rollover IRA	☐ Partnership
☐ Uniform Gift/Transfer to Minors	☐ Inherited IRA	☐ Limited Liability Corporation
State:	☐ Other:	
Brokerage Account Number:	Custodian Account Number:	Brokerage Account Number:
	Custodian Name:	
	Custodian Tax ID:	
	Please print, sign, and scan this page if applic	able
	rease print, sign, and sear this page is appre	
X		
Cust	todian Signature/Stamp	,

¹ Unless otherwise waived.

3 | Investor Information

The information provided in this section must be compliant with IRS Form W-9 and related instructions (see www.irs.gov for instructions). Legal addresses must include a residential street address (P.O. boxes will not be accepted).

1. Primary Account Holder/Minor (if Uniform Gift/Transfer to Minors Account)/Trustee/Authorized Signatory

21 20 N	\$500 Mark (1998)	10,000	
Social Security Number	Date of Birth (n	nm/dd/yyyy)	
Legal Street Address	City	State	Zip
Mailing Street Address	City	State	Zip
Email Address	Phone Number		
Please indicate if you are a:			
☐ U.S. Citizen ☐ Resident Alien ☐ Non-	-Resident Alien Country of	f Citizenship if non-U.S	. Citizen
	(A comple	ted applicable Form W-	8 is required for subscription)
 Joint Account Holder/Custodian (if Uniform One) Name (first, middle, last) 	Gift/Transfer to Minors Ac	count)/Co-Trustee/Auti	horized Signatory
Social Security Number	Date of Birth (m	m/dd/mmn)	
Legal Street Address	City	State	Zip
Mailing Street Address	City	State	Zip Zip
Email Address	Phone Number	State	<i></i>
Milali Addiess	- Filone Nulliber		
Please indicate if you are a:			
☐ U.S. Citizen ☐ Resident Alien ☐ Non-	-Resident Alien Country of	of Citizenship if non-U.	S. Citizen
	(A compl	eted applicable Form W	'-8 is required for subscription
3. Joint Account Holder/Co-Trustee/Authorized	Cianatory		
. Joint Account Holder/Co-Trustee/Authorized	signatory		
Name (first, middle, last)			
Name (first, middle, last)	Date of Birth (m	m/dd/yyyy)	
	Date of Birth (m	m/dd/yyyy)State	Zip
Social Security Number			ZipZip
Social Security Number Legal Street Address	City	State	
Social Security Number Legal Street Address Mailing Street Address	City City	State	

Entity Information (only required for entity account types)

E IDAI 1			D . CE .: ((11/)	
Γax ID Number			Date of Formation (n	im/dd/yyyy)	20.00
Legal Street Addre	ess		City	State	Zip
Country of Domic	ile (Form W-	required for non-U.S.)			
Exemptions per Fo at <u>www.irs.gov</u>)	orm W-9 (see	Form W-9 instructions			
Exemptions for FA	ATCA Report	ing Code (if any)			
Please indicate if y	ou are a:	☐ Pension Plan	☐ Profit Sharing Plan	□ Not-for-	Profit Organization
4 Transfer	on Death	Reneficiary Informa	tion (Ontional for I	dividual/Ioin	t Accounts)
4 Transfer	on Death	Beneficiary Informa	ntion (Optional for I	ndividual/Join	t Accounts)
7 - 86 520 - 781 - 581 - 153	- No 12/10/21	5500 5100 5100 5100 5100 5100 5100 5100		15 25 25	00000 P P 100000
Please designate th	ne beneficiary	information for your acc	ount. If completed, all info	ormation is require	ed. Secondary beneficiary
Please designate th	ne beneficiary	information for your acc		ormation is require	ed. Secondary beneficiary esidents).
Please designate the information may confirmation may confirmation may confirmation may confirmation may confirmation may be seen to be seen as the information may be seen as the informa	ne beneficiary only include w	information for your acc hole percentages and mu	ount. If completed, all info st total 100%. (Not availal	ormation is require ple for Louisiana r	ed. Secondary beneficiary esidents).
Please designate th	ne beneficiary	information for your acc	ount. If completed, all info st total 100%. (Not availal	ormation is require	ed. Secondary beneficiary esidents). Primary Secondary%
Please designate the information may confirmation may confirmation may confirm the information may be seen that the information may	ne beneficiary only include w	information for your acc hole percentages and mus Last Name	ount. If completed, all info st total 100%. (Not availal SSN D	ormation is require ole for Louisiana r ate of Birth	ed. Secondary beneficiary esidents). Primary Secondary% Primary
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Please designate the information may confirm the result of	ne beneficiary only include w MI	information for your acc hole percentages and mu- Last Name Last Name	ount. If completed, all info st total 100%. (Not availal SSN D	ormation is require tole for Louisiana r tate of Birth	ed. Secondary beneficiary esidents). Primary Secondary% Primary Secondary% Primary Primary
Please designate the information may confirmation may confirmation may confirm the information may be seen that the information may	ne beneficiary only include w	information for your acc hole percentages and mus Last Name	ount. If completed, all info st total 100%. (Not availal SSN D	ormation is require ole for Louisiana r ate of Birth	ed. Secondary beneficiary esidents). Primary Secondary
Please designate the information may confirm Name First Name First Name	me beneficiary only include w MI MI MI	information for your acc hole percentages and mus Last Name Last Name Last Name	ount. If completed, all info st total 100%. (Not availal SSN D	ormation is require tole for Louisiana r tate of Birth	ed. Secondary beneficiary esidents). Primary Secondary% Primary Secondary% Primary Primary
Please designate the information may confirm Name First Name First Name	me beneficiary only include w MI MI MI	information for your acc hole percentages and mu- Last Name Last Name	ount. If completed, all info st total 100%. (Not availal SSN D	ormation is require tole for Louisiana r tate of Birth	ed. Secondary beneficiary esidents). Primary Secondary% Primary Secondary% Primary Primary
Please designate the information may confirst Name First Name First Name First Name First Name	MI MI MI Plan Asset	Last Name Last Name Last Name Last Name	ount. If completed, all infost total 100%. (Not availal SSN D SSN D	ormation is require ole for Louisiana r ate of Birth ate of Birth ate of Birth	ed. Secondary beneficiary esidents). Primary Secondary% Primary Secondary% Primary Primary

² The term "benefit plan investor" includes, for e.g.: (i) an "employee benefit plan" as defined in section 3(3) of the U.S. Employee Retirement Income Security Act of 1974, as amended ("ERISA"), that is subject to Title I of ERISA (such as employee welfare benefit plans (generally, plans that provide for health, medical or other welfare benefits) and employee pension benefit plans (generally, plans that provide for retirement or pension income)); (ii) "plans" described in section 4975(e)(1) of the U.S. Internal Revenue Code of 1986, as amended (the "Code"), that is subject to section 4975 of the Code (including, for e.g., an "individual retirement account", an "individual retirement annuity", a "Keogh" plan, a pension plan, an Archer MSA described in section 220(d) of the Code, a Coverdell education savings account described in section 530 of the Code and a health savings account described in section 223(d) of the Code) and (iii) an entity that is, or whose assets would be deemed to constitute the assets of, one or more "employee benefit plans" or "plans" (such as for e.g., a master trust or a plan assets fund) under ERISA or the Plan Asset Regulations.

³ "Plan Asset Regulations" means the regulations issued by the United States Department of Labor at Section 2510.3-101 of Part 2510 of Chapter XXV, Title 29 of the United States Code of Federal Regulations, as modified by Section 3(42) of ERISA, as the same may be amended from time to time.

Antares Private Credit Fund | Subscription Agreement

6 | Distribution Instructions

You are <u>automatically</u> enrolled in our Distribution Reinvestment Plan, unless you are a resident of ALABAMA, ARKANSAS, CALIFORNIA, IDAHO, KANSAS, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW JERSEY, NORTH CAROLINA, OHIO, OREGON, TENNESSEE, VERMONT or WASHINGTON.

□ If you are not a resident of the states listed above, you are automatically enrolled in the Distribution Reinvestment Plan. PLEASE

CHECK HERE IF YOU DO NOT WISH TO BE ENROLLED in the Distribution Reinvestment Plan and complete the cash distribution information in the box below. For IRA (custodial held accounts), if you elect cash distributions, the funds must be sent to the custodian on a direct deposit basis. ☐ **Direct Deposit** to third party financial institution (complete section below) I authorize Antares Private Credit Fund or its agent to deposit my distribution into my checking or savings account. This authority will remain in force until I notify Antares Private Credit Fund in writing to cancel it. In the event that Antares Private Credit Fund deposits funds erroneously into my account, they are authorized to debit my account for an amount not to exceed the amount of the erroneous deposit. Name of Financial Institution Mailing Address City State Zip Code ABA Routing Number Account Number ☐ Mail a check to Primary Account Holder mailing address ☐ Mail a Check to Entity legal address

☐ If you are a resident of Alabama, Arkansas, California, Idaho, Kansas, Kentucky, Maine, Maryland, Massachusetts, Nebraska, New Jersey, North Carolina, Ohio, Oregon, Tennessee, Vermont or Washington, you are not automatically enrolled in the Distribution Reinvestment Plan. PLEASE CHECK HERE IF YOU WISH TO ENROLL in the Distribution Reinvestment Plan. You will automatically receive cash distributions unless you elect to enroll in the Distribution Reinvestment Plan.

7 | Investment Funding Method

□ Broker/Financial Advisor will □ By Wire: Please wire funds according to make payment on your behalf the instructions below.

Name: U.S. Bancorp Fund Services, LLC FBO Antares Private Credit Fund ABA: 091000022

Account No.: 1-047-9915-7656

8 | Electronic Delivery Consent (Optional)

Instead of receiving paper copies of the prospectus, prospectus supplements, annual reports, proxy statements, and other shareholder communications and reports, you may elect to receive electronic delivery of shareholder communications from Antares Private Credit Fund. If you would like to consent to electronic delivery, including pursuant to email, please sign below.

Antares Private Credit Fund | Subscription Agreement

By consenting below to electronically receive shareholder communications, including your account-specific information, you authorize said offering(s) to either (i) email shareholder communications to you directly or (ii) make them available on our website and notify you by email when and where such documents are available. You will not receive paper copies of these electronic materials unless specifically requested, the delivery of electronic materials is prohibited or we, in our sole discretion, elect to send paper copies of the materials

By consenting to electronic access, you will be responsible for certain costs, such as your customary internet service provider charges, and may be required to download software in connection with access to these materials. You understand this electronic delivery program may be changed or discontinued and that the terms of this agreement may be amended at any time. You understand that there are possible risks associated with electronic delivery such as emails not transmitting, links failing to function properly and system failure of online service providers, and that there is no warranty or guarantee given concerning the transmissions of email, the availability of the website, or information on it, other than as required by law.

	d scan this page of applicable.	
X		
Owner or Authorized Person Signature	Date (mm/dd/yyyy)	

9.a | Subscriber Representations

Antares Private Credit Fund is required by law to obtain, verify and record certain personal information from you or persons on your behalf in order to establish the account. Required information includes name, date of birth, permanent residential address and social security/taxpayer identification number. We may also ask to see other identifying documents. If you do not provide the information, Antares Private Credit Fund may not be able to open your account. By signing the Subscription Agreement, you agree to provide this information and confirm that this information is true and correct. If we are unable to verify your identity, or that of another person(s) authorized to act on your behalf, or if we believe we have identified potentially criminal activity, we reserve the right to take action as we deem appropriate which may include closing your account.

Please separately initial each of the representations below. Except in the case of fiduciary accounts, you may not grant any person a power of attorney to make the representations on your behalf.

In order to induce Antares Capital Credit Advisers LLC to accept this subscription, I (we) hereby represent and warrant as follows (Each account holder must hand-initial representations 1-9, to the extent applicable):

		Primary Investor	Co- Investor	Co- Investor
1.	I (we) have received the prospectus (as amended or supplemented) for Antares Private Credit Fund at least five business days prior to the date hereof.			
2.	I (we) have (A) a minimum net worth (not including home, home furnishings and personal automobiles) of at least \$250,000, or (B) a minimum net worth (as previously described) of at least \$70,000 and a minimum annual gross income of at least \$70,000. If I am an entity that was formed for the purpose of purchasing shares, each individual that owns an interest in the entity meets this requirement. ⁵			
3.	I am (we are) a resident of Alabama, California, Idaho, Iowa, Kansas, Kentucky, Maine, Massachusetts, Michigan, Missouri, Nebraska, New Jersey, New Mexico, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Puerto Rico, Tennessee, or Vermont and in addition to the general suitability requirements described above, I meet the higher suitability requirements, if any, imposed by my state of primary residence as set forth in the prospectus under "SUITABILITY STANDARDS." If I am an entity that was formed for the purpose of purchasing shares, each individual that owns an interest in the entity meets this requirement.			
4.	I am (we are) domiciled or have a registered office in the European Economic Area or in the United Kingdom, and qualify as (i) a "professional investor," within the meaning of Annex II to Directive 2014/65/EU or the United Kingdom Alternative Investment Fund Managers Regulations 2013 (SI 2013/1773) as amended, as applicable, or (ii) a "certified sophisticated investor" as defined under the Financial Services and Markets Act 2000 of the United Kingdom.			
5.	I acknowledge that there is no public market for the shares, shares of this offering are not liquid and appropriate only as a long-term investment.			
6.	I am purchasing the shares for my own account, or if I am purchasing shares on behalf of a trust or other entity of which I am a trustee or authorized agent, I have due authority to execute this subscription agreement and do hereby legally bind the trust or other entity of which I am trustee or authorized agent.			
7.	I acknowledge that Antares Private Credit Fund may enter into transactions with the Adviser's affiliates that involve conflicts of interest as described in the prospectus.			

⁵ In the case of sales to fiduciary accounts, the minimum standards set forth in the prospectus under "SUITABILITY STANDARDS" shall be met by the beneficiary, the fiduciary, account, or, by the donor or grantor, who directly or indirectly supplies the funds to purchase the shares if the donor or grantor is the fiduciary.

Ar	tares Private Credit Fund Subscription Agreement		
8.	I acknowledge that subscriptions must be submitted at least five business days prior to first day of each month and my investment will be executed as of the first day of the applicable month at the NAV per share as of the day preceding day. I acknowledge that I will not know the NAV per share at which my investment will be executed at the time I subscribe and the NAV per share as of the last day of each month will generally be made available at www.antaresbdc.com within 20 business days of the last day of each month.		
9.	I acknowledge that my subscription request will not be accepted any earlier than two business days before the first calendar day of each month. I acknowledge that I am not committed to purchase shares at the time my subscription order is submitted and I may cancel my subscription at any time before the time it has been accepted as described in the previous sentence. I understand that I may withdraw my purchase request by notifying the transfer agent at 1-888-484-1944 or through my financial intermediary.		

9.b | Additional Subscriber Representations and Signatures

For purposes of determining whether you satisfy the standards below, your net worth is calculated excluding the value of your home, home furnishings and automobiles, and, unless otherwise indicated, "liquid net worth" is defined as that portion of net worth that consists of cash, cash equivalents and readily marketable investments. Please separately initial each of the representations below. Except in the case of fiduciary accounts, you may not grant any person a power of attorney to make the representations on your behalf.

Investors in the following states have the additional suitability standards as set forth below.

	Primary Investor	Investor	Investor
If I am an Alabama resident, in addition to the suitability standards set forth above, an investment in Antares Private Credit Fund will only be sold to me if I have a liquid net worth of at least 10 times my investment in Antares Private Credit Fund and its affiliates.			
If I am a California resident, in addition to the suitability standards set forth above, I may not invest more than 10% of my liquid net worth in Antares Private Credit Fund.			
If I am an Idaho resident, I must have either (a) a liquid net worth of \$85,000 and annual gross income of \$85,000 or (b) a liquid net worth of \$300,000. Additionally, the total investment in Antares Private Credit Fund shall not exceed 10% of my liquid net worth. For these purposes, "liquid net worth" is defined as that portion of net worth that consists of cash, cash equivalents and readily marketable securities.			
If I am an Iowa resident, I (i) have either (a) an annual gross income of at least \$100,000 and a net worth of at least \$100,000, or (b) a net worth of at least \$350,000 (net worth should be determined exclusive of home, auto and home furnishings); and (ii) limit my aggregate investment in this offering and in the securities of other non-traded business development companies to 10% of my liquid net worth (liquid net worth should be determined as that portion of net worth that consists of cash, cash equivalents and readily marketable securities).			
If I am a Kansas resident, I understand that the Securities Commissioner of Kansas recommends that investors limit their aggregate investment in our securities and other similar investments to not more than 10% of their liquid net worth.			
If I am a Kentucky resident, I may not invest more than 10% of my liquid net worth in Antares Private Credit Fund or its affiliates. "Liquid net worth" is defined as that portion of net worth that is comprised of cash, cash equivalents and readily marketable securities.			
If I am a Massachusetts resident, in addition to the suitability standards set forth above, I may not invest more than 10% of my liquid net worth in Antares Private Credit Fund and in other illiquid direct participation programs. For these purposes, "liquid net worth" is defined as that portion of net worth that consists of cash, cash equivalents and readily marketable investments.			
If I am a Missouri resident, in addition to the suitability standards set forth above, no more than 10% of my liquid net worth shall be invested in the securities being registered in this offering.			
If I am a Nebraska resident, I must limit my aggregate investment in this offering and the securities of other business development companies to 10% of my net worth. If I am an "accredited investor" as defined in Regulation D under the Securities Act of 1933, as amended, I am not subject to the foregoing investment concentration limit.			

minus total liabilities.

Antares Private Credit Fund | Subscription Agreement

If you do not have another broker-dealer or other financial intermediary introducing you to Antares Private Credit Fund, then Quasar Distributors, LLC may be deemed to be acting as your broker-dealer of record in connection with any investment in Antares Private Credit Fund. For important information in this respect, see Section 10 below.

I declare that the information supplied in this Subscription Agreement is true and correct and may be relied upon by Antares Private Credit Fund. I acknowledge that the Broker/Financial Advisor indicated in Section 10 of this Subscription Agreement and its designated clearing agent, if any, will have full access to my account information, including the number of shares I own, tax information (including the Form 1099) and redemption information. Investors may change the Broker/Financial Advisor of record at any time by contacting Antares Private Credit Fund Investor Relations at the number indicated below at any time by contacting the transfer agent at 1-888-484-1944.

SUBSTITUTE IRS FORM W-9 CERTIFICATIONS (required for U.S. investors):

Under penalties of perjury, I certify that:

- The number shown on this Subscription Agreement is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by
 the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or
 dividends, or (c) the IRA has notified me that I am no longer subject to backup withholding; and
- 3. I am a U.S. citizen or other U.S. person (including a resident alien) (defined in IRS Form W-9; and
- 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

Each Account Holder/Trustee/Authorized Signatory must sign below. Please print, sign, and scan this page if applicable.

(Custodians must sign in Section 2 on a custodial account)

X	
Owner or Authorized Person Signature	Date (mm/dd/yyyy)
x	
Co-Investor or Authorized Person Signature	Date (mm/dd/yyyy)
x	
Co-Investor or Authorized Person Signature	Date (mm/dd/yyyy)

10 | Broker/Financial Advisor Information and Signature

The Financial Advisor must sign below to complete the order. The Financial Advisor hereby warrants that he/she is duly licensed and may lawfully sell shares in the state designated as the investor's legal residence.

Broker	Financial Advisor Name	Financial Advisor Name	
Advisor Mailing Address			
City	State	Zip Code	
Financial Advisor Number	Branch Number	Telephone Number	
Operations Contact Name	Operations Contact Email Add	lress	

Please note that unless previously agreed to in writing by Antares Private Credit Fund, all sales of securities must be made through a Broker, including when an RIA has introduced the sale. In all cases, Section 10 must be completed.

The undersigned confirm(s), which confirmation is made on behalf of the Broker with respect to sales of securities made through a Broker, that they (i) have reasonable grounds to believe that the information and representations concerning the investor identified herein are true, correct and complete in all respects; (ii) have discussed such investor's prospective purchase of shares with such investor; (iii) have advised such investor of all pertinent facts with regard to the lack of liquidity and marketability of the shares; (iv) have delivered or made available a current prospectus and related supplements, if any, to such investor, (v) have reasonable grounds to believe that the investor is purchasing these shares for his or her own account, (vi) have reasonable grounds to believe that the purchase of shares is a suitable investment for such investor, that such investor meets the suitability standards applicable to such investor set forth in the prospectus and related supplements, if any, and that such investor is in a financial position to enable such investor to realize the benefits of such an investment and to suffer any loss that may occur with respect thereto; and (vii) have advised such investor that the shares have not been registered and are not expected to be registered under the laws of any country or jurisdiction outside of the United States except as otherwise described in the prospectus. The undersigned Broker, Financial Advisor or Financial Representative listed in Section 10 further represents and certifies that, in connection with this subscription for shares, he/she has complied with and has followed all applicable policies and procedures of his or her firm relating to, and performed functions required by, federal and state securities laws, rules promulgated under the Securities Exchange Act of 1934, as amended, including, but not limited to Rule 151-1 ("Regulation Best Interest") and FINRA rules and regulations including, but not limited to Know Your Customer, Suitability and PATRIOT Act (Anti Money Laundering, Customer Identification) as required by its relationship with the investor(s) identified on this document.

THIS SUBSCRIPTION AGREEMENT AND ALL RIGHTS HEREUNDER SHALL BE GOVERNED BY, AND INTERPRETED IN ACCORDANCE WITH, THE LAWS OF THE STATE OF DELAWARE.

If you want to receive financial advice regarding a prospective investment in the shares, contact your broker-dealer or other financial intermediary.

Please print, sign, and	d scan this page if applicable.	
X]	
Financial Advisor/Representative Signature	Date (mm/dd/yyyy)	

11 | Other Important Information

If investors participating in the Distribution Reinvestment Plan or making subsequent purchases of shares of Antares Private Credit Fund experience a material adverse change in their financial condition or can no longer make the representations or warranties set forth in Section 9 above, they are asked to promptly notify Antares Private Credit Fund and the Broker in writing. The Broker may notify Antares Private Credit Fund if an investor participating in the Distribution Reinvestment Plan can no longer make the representations or warranties set forth in Section 9 above, and Antares Private Credit Fund may rely on such notification to terminate such investor's participation in the Distribution Reinvestment Plan.

No sale of shares may be completed until at least five business days after you receive the final prospectus. Subscribers are encouraged to read the prospectus in its entirety for a complete explanation of an investment in the shares of Antares Private Credit Fund.

To be accepted, a subscription request must be made with a completed and executed Subscription Agreement in good order and payment of the full purchase price at least five business days prior to the first calendar day of the month (unless waived). All items on the Subscription Agreement, other than those marked optional, must be completed in order for your Subscription Agreement to be processed. You will receive a written confirmation of your purchase.

The Fund and the Distributor will direct any dealers to, upon receipt of any and all checks, drafts, and money orders received from prospective purchasers of shares, transmit same together with a copy of this executed Subscription Agreement or copy of the signature page of such agreement, stating among other things, the name of the purchaser, current address, and the amount of the investment to U.S Bancorp Fund Services LLC (a) by the end of the next business day following receipt where internal supervisory review is conducted at the same location at which subscription documents and checks are received, or (b) by the end of the second business day following receipt where internal supervisory review is conducted at a different location than which subscription documents and checks are received.

Return the completed Subscription Agreement to:

Antares Private Credit Fund c/o Transfer Agent 615 East Michigan St. Milwaukee, WI 53202.

Individual	 If a non-U.S. person, Form W-8BEN
Joint (including JTWROS, Tenants in Common, Community Property)	 For each non-U.S. Person account holder, Form W- 8BEN
IRA (including ROTH, SEP, Rollover, Inherited)	• None
Trust	 Certificate of Trust or Declaration of Trust Appropriate W-8 series form (see https://www.irs.gov/forms-pubs/about-form-w-8)
Corporation (including C Corp., S Corp., LLC)	 Formation documents Articles of incorporations Authorized signatory list Appropriate W-8 series form (see https://www.irs.gov/forms-pubs/about-form-w-8)
Partnership	 Formation documents Authorized signatory list Appropriate W-8 series form (see https://www.irs.gov/forms-pubs/about-form-w-8)