

Investor Change Form

All pages must be completed for instructions to be acceptable and valid. Sections 1 and 9 must be completed for all requested changes.

Please contact your custodian for the following changes on qualified accounts:

- Change of custodian for a qualified account, such as an IRA.
- Change of distribution destination, such as a custodian account number change.

Instructions

This form may be used to make the following changes:

Section 2: Change or correction of address of record

Section 3: Add an alternate address where duplicate tax and/or distribution statements may be sent

Section 4: Change the Cost Basis method of computation for covered shares

Section 5: Change Distribution instructions for non-qualified accounts

Change of Distributions for qualified accounts such as an IRA, please contact your custodian (except to terminate DRP)

Participate/terminate participation in the Distribution Reinvestment Plan (qualified and non-qualified accounts)

Distributions for qualified and brokerage accounts will be sent to the custodian

Section 6: Add or change a Power of Attorney

Add or change Trustee for a Trust or Perpetual Entity (e.g. Corporation, Pension or Profit Sharing Plan) **Note:** Only if the Trust name and/or SSN/Tax ID# are *not* changing; **must be signed by investor(s)**

Change name due to divorce or marriage; must be signed by investor(s)

Section 7: Change Financial Advisor; must be signed by investor(s)

Section 8: Consent for Electronic Delivery

Forms required to make the following changes: (may be accessed at www.cioninvestments.com)

Change of Ownership or Change of SSN/Tax ID#: Transfer forms for applicable product(s)

Beneficiary Designation: Transfer on Death form (Individual and Joint Tenant WROS accounts only)

Please complete this form and mail or fax to:

For CION Ares Diversified Credit Fund

REGULAR MAIL: OVERNIGHT DELIVERY: FAX:

CION Ares Management c/o DST Systems Inc. CION Ares Management, LLC c/o DST Systems Inc. (844) 643-0426

PO BOX 219422 430 W 7th St

Kansas City, MO 64121-9422 Kansas City, MO 64105-1407

For CION Investment Corporation

REGULAR MAIL: OVERNIGHT DELIVERY: FAX:

CION Investment Group, LLC c/o DST Systems, Inc. CION Investment Group, LLC c/o DST Systems, Inc. (877) 379-5936

PO BOX 219476 430 W 7th St

Kansas City, MO 64121-9476 Kansas City, MO 64105

Should you have any questions, please call Investor Relations at (888) 729-4266.





Section 1: Registration Name(s) on Account

Required For All Changes					
Investor Name/Trustee			SSN/Tax ID#		
Co-Investor Name/Trustee (if applicable)			SSN/Tax ID#		
Check if changes for multiple	e SSN/Tax ID#				
Section 2: Address of Re	ecord Change				
Mailing Address					
City			State	Zip	
Phone #	Fax	Email			
Section 3: Alternate Add	ress				
Mail a duplicate of all statem	ents to the alternate address indicated below	V.			
Name					
Mailing Address					
City			State	Zip	
Phone Number					



Section 4: Cost Basis Method of Computation

ABA Routing Number	Account Number			
Name of Financial Institution				
Complete for electronic deposit of distributions. Electronically deposit* distributions to the account indicated below: Checking Savings				
City	State	Zip		
Mailing Address				
FBO	Account Number	Account Number		
Name of Financial Institution				
Participate in Distribution Reinvestment Plan (If already a member/partner of the fur Terminate participation in the Distribution Reinvestment Plan (Must meet minimum romail Check to the address of record (Cash distributions for custodial and brokerage and Mail check to Brokerage Account or Other (Complete following section)	equirement to terminate if applic			
Section 5: Change of Distribution Instructions				
Select one: First-in, First-out (FIFO) Last-in, First-out (LIFO)	Average Cost	Specific Share Identification (SSI)		
The issuer has elected the first-in, first-out (FIFO) method as the default for c the gain or loss on the sale as well as the cost basis for the shares as defined	•			

DST Systems, Inc. or its named agent (hereinafter referred to as "DST") is authorized to deposit my/our distributions directly into the account specified on this form. The authority will remain in force until I/we have given written notice that I/we have terminated it, or until DST has notified me/us that this deposit service has been terminated. In the event that DST deposits funds erroneously into my/our account, it is authorized to debit my/our account for an amount not to exceed the amount of the erroneous deposit.



Signature

Section 6: Change of Power of Attorney/Trustee/Name

	Attorney, Resignation and Acceptanc cate must be provided, as applicable	•	on, Copy of Marriage Certificate, Divorce		
Please remember to make changes	to Address, Distribution Instructions	or Financial Advisor, if applicable			
Add or Change Power of Attorney to:					
Add or Change Trustee Name to; must be	signed by investor(s):				
Change Name to; must be signed by inve	estor(s):				
· ·	Advisor or Investor Representation of the investor(s). Please remember to		Section 5 if applicable.		
New Broker-Dealer or Financial Institution	Name				
New Financial Advisor/Investor Representative Name(s)		Advisor Number/Team I	Advisor Number/Team ID#		
Mailing Address					
City		State	Zip		
Phone Number	Fax	Email			
Section 8: Consent for Electron	nic Delivery				
to be delivered to me, as well as any documents not uploaded are made Electronic Delivery option must prov such account relating to the e-mail a	investment or marketing updates, and readily available on the website will lide a valid e-mail address, and such address be terminated or changed.)	nd to notify me via e-mail when s be e-mailed to the address ident	cioninvestments.com documents required such reports or updates are available. Any tified below. (Any investor who elects this r notifying the Company in writing should		
The email address for receipt of noti	fications as outlined above is:				
Please print e-mail address clearly					

Date





Section 9: Required Signatures

Sections 6 and 7 must be authorized with the signature of the Investor(s) and/or Custodian. Select One. We authorize information to be changed on all investments recorded under the above-referenced SSN/Tax ID# ☐ I/we authorize information to be changed on only the following: registration, ownership type and/or product name Please check the applicable CION Investments fund(s): ☐ CION Ares Diversified Credit Fund ☐ CION Investment Corporation Financial Advisor/Investor Representative signature indicates representation that he/she is authorized to make changes on behalf of the investor(s). Required Signatures – All Investors or Authorized Representative(s) Signature of Investor/Trustee Date Signature of Co-Investor/Trustee - OR - Custodian Date Signature of Financial Advisor/Investor Representative Date Medallion Signature Guarantee Stamp is required only when the custodian is signing on behalf of the Investor/Trustee.