

#### UNIT REPURCHASE AUTHORIZATION FORM

#### For VistaOne, L.P. and VistaOne (TE), L.P.

Use this form to request repurchase of your units in VistaOne, L.P. and VistaOne (TE), L.P. (as applicable, the "Fund"). Please complete all sections below. Capitalized terms not defined herein shall have the meaning ascribed to them in the Unit Repurchase Program (the "Program") of VistaOne, L.P., which can be found on VistaOne, L.P.'s website at *pws.vistaequitypartners.com*.

#### 1. REPURCHASE FROM THE FOLLOWING ACCOUNT

Name(s) on the Acco	unt		
Account Number		Social Security Number/TIN	Account Registration
Financial Advisor Na	me	Financial Advisor Phone Number	Financial Advisor Email Address
2a. REPURCHASE A	MOUNT (	Please select only one option, required	)
☐ All Units			
$\square$ Number of Units <sup>1</sup>			
☐ Dollar Amount <sup>2</sup>	\$		

<sup>1</sup> If the unit amount provided exceeds the amount held by a Unitholder, then the Unitholder's units may be repurchased in full, subject to any applicable repurchase limitations. To the extent any fractional unit amounts are provided, the request will be rounded down to the nearest whole unit amount. If a unit amount selected would result in a Unitholder failing to maintain the minimum balance of \$2,500, then the Fund may reduce the amount to be repurchased so that the required minimum is maintained, or such Unitholder's units may be repurchased in full, subject to any applicable repurchase limitations.

<sup>&</sup>lt;sup>2</sup> Dollar amounts will be rounded down to nearest whole unit amount based on the applicable Transaction Price. If a dollar amount provided exceeds the value of the units held by a Unitholder based on the Transaction Price, the Unitholder's units may be repurchased in full, subject to any applicable repurchase limitations. If a dollar amount provided would result in a Unitholder failing to maintain the minimum balance of \$2,500, then the Fund may reduce the amount to be repurchased so that the required minimum is maintained, or such Unitholder's units may be repurchased in full, subject to any applicable repurchase limitations.

## 2b. UNIT CLASS (Please select only one option, required)

Please complete a separate repurchase form for each class of units for which you are requesting repurchase. If you do not submit your repurchase request within the applicable quarterly window (available at *pws.vistaequitypartners.com*) and you still wish to have your units repurchased, you must resubmit such request within the repurchase window of the next calendar quarter.

For VistaOne, L.P.	For VistaOne (TE), L.P.
☐ Class A-B units	☐ Class A-B <sub>TE</sub> units
☐ Class A-D units	☐ Class A-D <sub>TE</sub> units
☐ Class A-I units	☐ Class A-I <sub>TE</sub> units
☐ Class A-S units	☐ Class A-S <sub>TE</sub> units
☐ Class B units	☐ Class B <sub>TE</sub> units
☐ Class D units	$\square$ Class $D_{TE}$ units
☐ Class E units <sup>4</sup>	☐ Class I <sub>TE</sub> units
☐ Class I units	☐ Class R <sub>TE</sub> units
☐ Class R units	$\square$ Class $S_{TE}$ units
☐ Class S units	
3. REPURCHASE TYPE (Please select only one option	ı, required)
□ Normal	
□ Death	
☐ Disability	
□ Divorce	
Additional documentation is required if repurchasing due Relations for detailed instructions at 833-344-0331.	to Death, Disability or Divorce. Contact Investor

<sup>&</sup>lt;sup>3</sup> For the avoidance of doubt, unitholders (the "Feeder Unitholders") of VistaOne (TE), L.P. (the "Feeder") will have their units repurchased at the Feeder level, and the Feeder will participate in the Plan on behalf of the Feeder Unitholders. Feeder Unitholders shall have a right to participate in the Plan under the same terms as direct unitholders of VistaOne, L.P.

<sup>&</sup>lt;sup>4</sup> Class E units may be subject to certain additional requirements for participating in the Repurchase Program in accordance with any applicable Vista internal policies and procedures.

### 4. PAYMENT INSTRUCTIONS (Select only one)

Repurchase proceeds for qualified accounts, including IRAs and other Custodial accounts, and certain Broker-controlled accounts as required by your Broker/Dealer of record, will automatically be issued to the Custodian or Broker/Dealer of record, as applicable. For non-intermediated accounts, please provide below information for remittance of repurchase proceeds.

Name / Entity Name / Financial Institution		stitution	Mailing Address		
City	State	Zip Code	Account Number		
ustodian Invest authorize the Fi und deposits fur	t <b>ors Only</b> ) und or its agent to d	leposit my distribution in my account, they are au	ed check with the submission ato my checking or savings a thorized to debit my account	ccount. In the event that t	

### 5. UNIT REPURCHASE PROGRAM CONSIDERATIONS (Select only one)

The Program contains limitations on the number of units that can be repurchased under the Program during any quarter. In addition to these limitations, we cannot guarantee that we will have sufficient funds to accommodate all repurchase requests made in any applicable repurchase period and we may elect to repurchase fewer units than have been requested in any particular quarter, or none at all. If the number of units subject to repurchase requests exceeds the then applicable limitations, or if we otherwise do not make all requested repurchases, each Unitholder's request will be reduced on a pro rata basis after we have repurchased all units for which repurchase has been requested due to death, disability or divorce and other limited exceptions. If repurchase requests are reduced on a pro rata basis after we have repurchased all units for which repurchase has been requested due to death, disability or divorce and other limited exceptions, you may elect (at the time of your repurchase request) to either withdraw your entire request for repurchase or have your request honored on a pro-rata basis. If you wish to have the remainder of your initial request repurchased, you must resubmit a new repurchase request for the remaining amount. For the avoidance of doubt, if a repurchase request is pro-rated in a quarterly repurchase offer, you will still remain in the DRIP unless you have otherwise "opted out" of the DRIP. Please select one of the following options below. If an option is not selected, your repurchase request will be processed on a pro-rata basis, if needed.

	Process my repurchase request on a pro-rata basis.
	Withdraw (do not process) my entire repurchase request if amount will be reduced on a pro-rata basis.
6. CC	OST BASIS SELECTION (Select only one)
they a and to reinve	rederal income tax information reporting rules generally apply to certain transactions in the Fund's units. Where apply, the "cost basis" calculated for the units involved will be reported to the Internal Revenue Service ("IRS") you. Generally, these rules apply to the Fund's units, including those purchased through the Fund's distribution estiment plan. You should consult your own tax advisor regarding the consequences of these new rules and your pasis reporting options.
Indica	ate below the cost basis method you would like us to apply.
IMPO	ORTANT: If an option is not selected, your cost basis will be calculated using the FIFO method.
	FIFO (First – In / First Out)
	LIFO (Last – In / First Out) Consult your tax advisor to determine whether this method is available to you.
	Specific Lots
If you	have selected "Specific Lots," please identify the lots below:
Dat	e of Purchase: Amount of Purchase:
Dat	e of Purchase: Amount of Purchase:
Dat	e of Purchase: Amount of Purchase:

### 7. AUTHORIZATION AND SIGNATURE

# IMPORTANT: Signature Guarantee may be required if any of the following applies:

- Amount to be repurchased is \$500,000 or more.
- The repurchase is to be sent to an address other than the address we have had on record for the past 30 days.
- The repurchase is to be sent to an address other than the address on record.
- If name has changed from the name in the account registration, we must have a one-and-the-same name signature guarantee. A one-and-the-same signature guarantee must state "<Previous Name> is one-and-the-same as <New Name>" and you must sign your old and new name.
- The repurchase proceeds are deposited directly according to banking instructions provided on this form. (Non-Custodial Investors Only)

Investor Name (Please Print)	Signature	Date
Co-Investor Name (Please Print)	Signature	Date
Signature Guarantee (Affix Medallion or Signature Guarantee Stamp Below)	Custodian and/or Broker/Dealer Author (if applicable)	
	Signature of Authorized Person	

Please refer to the private placement memorandum of the Fund, as may be amended and supplemented from time to time, for a description of the current terms of the Program. The Transaction Price will be available at pws.vistaequitypartners.com and www.sec.gov. There are various limitations on your ability to request that we repurchase your units, including, subject to certain exceptions, the Early Repurchase Deduction if your units have been outstanding for less than two years. In addition, the aggregate NAV of total repurchases of Class A-B, Class A-D, Class A-I, Class A-S, Class B, Class D, Class E, Class I, Class R, Class S units and any other Class of units (other than Class V units) (including repurchases at the Feeder Fund but excluding any Early Repurchase Deduction applicable to the repurchased units) will be limited to no more than 5% of the Fund's aggregate NAV (excluding the NAV attributable to Class V units) as of the close of the prior quarter. The General Partner may determine to make exceptions to, amend or suspend the Program without Unitholder approval. Material modifications to and suspensions of the Program will be disclosed in a Current Report on Form 8-K. Repurchase of units, when requested, will generally be made quarterly; provided, however, that the General Partner may determine from time to time to adjust the timing of repurchases. The upcoming quarterly window is available at Fund's website at pws.vistaequitypartners.com. All requests for repurchases must be received in good order by 4:00 p.m. (Eastern time) on the applicable repurchase request deadline. A Unitholder may withdraw his or her repurchase request by notifying the transfer agent, directly or through the Unitholder's financial intermediary, on the Fund's toll-free, automated telephone line, 833-344-0331. Repurchase requests must be cancelled before 4:00 p.m. (Eastern time) on the applicable repurchase request deadline. We cannot guarantee that we will have sufficient available funds or that we will otherwise be able to accommodate any or all requests made in any applicable repurchase period. All questions as to the form and validity (including time of receipt) of repurchase requests and notices of withdrawal will be determined by the Fund, in its sole discretion, and such determination shall be final and binding.

**E- Mail:** Vista Equity Partners, SS&C GIDS, Inc. at VistaAI@sscinc.com, with a copy to: PrivateWealthSolutions@vistaequitypartners.com

**Investor Relations:** 833-344-0331