FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 OMB Number: 3235-0287 Estimated average burden hours per response: 0.5

1. Name and Address of Reporting Person Boswerger Laura C. Holson			2. Issuer Name and Ticker or Trading Symbol <u>New Mountain Private Credit Fund</u> [NONE]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Cofficer (give title Other (specify				
(Last) 1633 BROADWA'	(First) Y, 48TH FLOOR	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 12/17/2024	Chief Operating Officer				
(Street) NEW YORK	NY	10019	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State)	(Zip)						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	ecution Date, Transaction		4. Securities Ac Disposed Of (D)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
		Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)		(Instr. 4)	
Common shares of ben. interest, par value \$0.001 per share	12/17/2024	J ⁽¹⁾		3,901.17 ⁽¹⁾	Α	(1)	3,901.17 ⁽¹⁾	D		
Common shares of ben. interest, par value \$0.001 per share	12/17/2024	Р		16,800 ⁽²⁾	Α	(2)	20,701.17	D		

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. 8)		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)		Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	(Inst	Transaction(s) (Instr. 4)		

Explanation of Responses:

1. Reflects common shares of beneficial interest, par value \$0.001 per share (the "Shares") that were issued to New Mountain Guardian Investments III, L.L.C. to be held on behalf of its members in connection with the merger agreement between Issuer and New Mountain Guardian III BDC, L.L.C. ("NMG") and related transactions thereto and distributed pro rata to Reporting Person as a member of NMG effective as of the closing of such transactions. Shares received is an estimate based on calculations available as of the date of filing. The Reporting Person undertakes to amend this Form 4, if necessary, following the final calculation.

2. Includes 800 Shares that were received by the Reporting Person for no consideration in connection with the Reporting Person's purchase from the Issuer of 16,000 Shares at \$25.00 per Share.

<u>/s/ Joseph W. Hartswell, Attorney-</u> <u>in-Fact</u> ** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.