$OXFORDPARK\\ \text{INCOME FUND, INC.}$

ADDITIONAL APPLICATION FORM

This form may be used by any current investor in the Oxford Park Income Fund ("OXPIF") who desires to purchase additional shares within the same share class of the OXPIF currently owned and who purchased their shares directly from OXPIF. Investors who desire to purchase shares in a new share class must complete the "OXPIF-Investor Application and Subscription Agreement" ("Initial Application") Investors who acquired shares other than through use of an Initial Application (e.g., through a transfer of owners or transfer on death) and who wish to make additional investments must complete the Initial Application.

Complete all five of the following sections, and then submit the completed form by fax or mail using the included instructions. If you have any questions, contact investor services at 877-458-3589.

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(1)	NAME OF INVESTOR OR TRUSTEE (REQUIRED)	_
(-)		
INVESTOR INFORMATION	NAME OF JOINT INVESTOR	\neg
(REQUIRED)	EXISTING OXFORD PARK INCOME FUND ACCOUNT NUMBER (REQUIRED)	
	INVESTOR SOCIAL SECURITY NUMBER / TAX IDENTIFICATION NUMBER	
	INVESTOR PHONE NUMBER	
TYPE OF AUTOMATIC INVESTMENT PLAN (AIP) UPDATE (REQUIRED)	This form may be used by any current investor in Oxford Park Income Fund, Inc. (OXPIF) who desires to purchase addition shares within the same share class of Priority currently owned and who purchased their shares directly from Priority. Investors who desire to purchase shares in a new share class must complete the "Priority Income Fund, Inc. Application" ("Initial Application") Investors who acquired shares other than through use of an Initial Application (e.g., through a transfe owners or transfer on death) and who wish to make additional investments must complete the Initial Application. INVESTMENT AMOUNT: \$	O 1s
BROKER DEALER / FINANCIAL ADVISOR INFORMATION	The Financial Advisor must sign below to complete order. The Financial Advisor hereby warrants that he/she is duly licens and may lawfully sell shares in the state designated as the investor's legal residence. Registered Investment Adviser (RIA): All sales of securities must be made through a Broker-Dealer. If an RIA has introduced a sale, the sale must be conducted through (1) the RIA in his or her capacity as a Registered Representative of Broker-Dealer, if applicable; (2) a Registered Representative of a Broker-Dealer which is affiliated with the RIA, if applicable (3) if neither (1) nor (2) is applicable, an unaffiliated Broker-Dealer. (Section 3 must be filled in) The undersigned confirm on behalf of the Broker-Dealer that they (1) have reasonable ground to believe that the informat and representations concerning the investor identified herein are true, correct and complete in all respects; (2) have discussed such investor's prospective purchase of shares with such investor; (3) have advised such investor of all pertine facts with regard to the lack of liquidity and marketability of the shares; (4) have delivered a current Prospectus and relate supplements, if any, to such investor; (5) have reasonable grounds to believe that the investor is purchasing these shares his or her own account; (6) have reasonable grounds to believe that the purchase of shares is a suitable investment for su investor, that such investor meets the suitability standards required by applicable law, regulation or rule, as well as any 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 lost that may occur with respect thereto. DATE (REQUIRED)	of a le; ion nt d i foi
	X SIGNATURE OF FINANCIAL ADVISOR DATE (REQUIRED)	
	PAGE 1 OF 2	—

OXFORD PARK INCOME FUND, INC.

ADDITIONAL APPLICATION FORM

Owner

Joint Owner

(4)

INVESTOR / SUBSCRIBER SIGNATURES (REQUIRED) **SUBSTITUTE W-9: I HEREBY CERTIFY** under penalty of perjury that (i) the taxpayer identification number shown on this Additional Application is true, correct and complete, (ii) I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or distributions, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding, and (iii) I am a U.S. person.

Please separately initial each representation below. Except in the case of fiduciary accounts, you may not grant any person a power of attorney to make such representations on your behalf. In order to induce OXPIF to accept this Additional Application, I hereby represent and warrant to you as follows:

(1)	I have received the final Oxford Park Income Fund, Inc.]					
(2)	I acknowledge that there is no public market for the shar investment in shares is not liquid.]					
(3)	I (we) represent that I am (we are) purchasing the share or, if I am (we are) purchasing shares on behalf of a trus (we are) trustee(s) or authorized agent(s), then I (we) re authority to execute the Application and do hereby legal entity of which I am (we are) trustee(s) or authorized agentity or authorized agentity of which I am (we are) trustee(s) or authorized agentity o]					
All items on this Additional Application must be completed in order for your application to be processed.								
We will deliver a confirmation sale to you after your purchase is completed.								
X								
SIGI	NATURE OF INVESTOR (REQUIRED)	DATE (REQUIRED)						
x								
	NTED NAME OF INVESTOR (REQUIRED)							
l _x								
SIGI	NATURE OF JOINT INVESTOR / TRUSTEE/ CUSTODIAN (if applicable)	DATE (REQUIRED)						
х								
PRINTED NAME OF JOINT INVESTOR / TRUSTEE/ CUSTODIAN (if applicable)								
You should not invest in OXPIF unless you have read and understood this agreement and the Prospectus referred to above and understand the risks								
associated with an investment in OXPIF. In deciding to invest in OXPIF, you should rely only on the information contained in the Prospectus, and not on								

(5)

MAILING INSTRUCTIONS

Please make your check payable to **Oxford Park Income Fund, Inc.**, and, along with the completed Additional Application, such check will be mailed or delivered by the selected Broker-Dealer or Registered Investment Advisor to:

based on the information provided by the prospective investor regarding the investor's financial situation and investment objectives

any other information or representations from any other person or source. OXPIF and each person selling shares of OXPIF common stock shall be responsible for making every reasonable effort to determine that such purchase of shares in a suitable and appropriate investment for each investor,

Standard Mail

U.S. BANK GLOBAL FUND SERVICES Attn: Oxford Park Income Fund, Inc P.O. Box 701 Milwaukee, WI 53201-0701

ALL ITEMS MUST BE READ AND INITIALED

Telephone: 877-458-3589 Alternativefundsupport@usbank.com

ACH / Wire Instructions

Bank:

U.S. BANCORP FUND SERVICES, LLC
ABA #: 091000022
SWIFT Code: USBKUS44IMT
Acct #: 104798220539
Acct Name:
U.S. BANCORP FUND SERVICES, LLC
Oxford Park Income Fund, Inc

Overnight Mail

U.S. BANK GLOBAL FUND SERVICES Attn: Oxford Park Income Fund, Inc 615 East Michigan St. 3rd Floor Milwaukee, WI 53202

Telephone: 877-458-3589 Alternativefundsupport@usbank.com

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