



**Part II Organizational Action** (continued)

17 List the applicable Internal Revenue Code section(s) and subsection(s) upon which the tax treatment is based ▶ IRC Section 301(c)(2)

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18 Can any resulting loss be recognized? ▶ N/A

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19 Provide any other information necessary to implement the adjustment, such as the reportable tax year ▶ See Attached Schedule

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Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

**Sign Here**  
Signature ▶  Date ▶ 9-10-19  
Print your name ▶ BRUCE L. RUBIN Title ▶ CHIEF FINANCIAL OFFICER

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶				Firm's EIN ▶
	Firm's address ▶				Phone no.

Oxford Square Capital Corp.  
Supplemental Attachment to Form 8937

Class: Common  
CUSIP: 69181V107  
TICKER: OXSQ

Record Date	Payment Date	Per Share Distribution	Taxable Income	Long Term Capital Gains	NonDividend Distributions
3/16/2018	3/31/2018	\$ 0.20	67.35297%	0.00%	32.64703%
6/15/2018	6/30/2018	\$ 0.20	67.35297%	0.00%	32.64703%
9/14/2018	9/28/2018	\$ 0.20	67.35297%	0.00%	32.64703%
12/17/2018	12/31/2018	\$ 0.20	67.35297%	0.00%	32.64703%