

Distribution Change Form

This form may be used by any current investor in NexPoint Capital, Inc. (the "Company") to receive distributions from the Company by ACH direct deposit or by Check

STEP 1: CURRENT SUBSCRIBER INFORMATION (please print name in which shares are registered)

Investor Name

Co-Investor Name

Investor Social Security/ Taxpayer ID #

Co-Investor Social Security/ Taxpayer ID #

Street Address

City

State

Zip

NexPoint Account Number

Home Telephone Number

STEP 2: DISTRIBUTIONS

Custodial Ownership

- I prefer that my distribution be sent to my Custodian for deposit into the Custodial account cited in my shareholder record.

Account Number

- I prefer that my distribution be reinvested

Non-Custodial Ownership

- I prefer that my distribution be paid by check to the address noted in my shareholder record
- I prefer my distribution be reinvested
- I prefer that my distribution be deposited directly into the checking or savings account listed below
Please note: ACH applies to bank checking and savings accounts only.

Name of Financial Institution

Name(s) on Account

ABA Number/Bank Account Number

- Checking (Attach voided check) Savings (Attach voided deposit slip)

- I prefer that my distribution be deposited directly into my brokerage account listed below (next page)

Distribution Change Form (continued)

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Name of Financial Institution

Street Address

City

State

Zip

Name(s) on Account

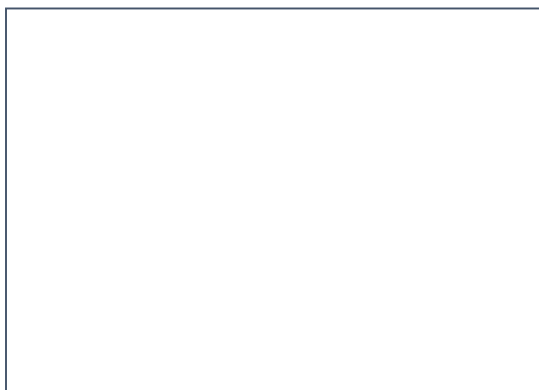
Account Number

STEP 3: SUBSCRIBER SIGNATURES

Signature of Investor or Trustee

Signature of Co-Investor or Trustee, if applicable

Date



Medallion Signature Guarantee

Regular Mail

NexPoint Capital, Inc.
c/o DST Systems Inc.
P.O. Box 219630
Kansas City, MO 64121-9630
(844) 485-9167

Express Mail

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c/o DST Systems Inc.
430 W. 7th Street
Kansas City, MO 64105
(844) 485-9167

NexPoint Capital, Inc.

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