

## A - INVESTMENT

1. ☐ **INITIAL INVESTMENT**  
 Total Invested: \$ \_\_\_\_\_
- ☐ **ADDITIONAL INVESTMENT (Minimum \$500)**  
 Account Number: \_\_\_\_\_
2. **METHOD OF INVESTMENT:**
- ☐ **CHECK ENCLOSED** - Make check payable to **InPoint Commercial Real Estate Income, Inc. c/o Inland** (We do not accept cash, starter checks, foreign checks, travelers checks or third party checks.)
- ☐ **FUNDS SENT SEPARATELY**
- ☐ **FUNDS WIRED**  
**Wiring Instructions:**  
 UMB Bank ABA # 101000695  
 1008 Oak Street DDA Account # 9871975967  
 Kansas City, MO 64106 FBO: Name of Stockholder
3. **TYPE OF PURCHASE (Please select one)**
- ☐ **CLASS A SHARES** (Minimum investment \$2,500)  
☐ For purchases of Class A shares without selling commissions.
- ☐ **CLASS T SHARES** (Minimum investment \$2,500)
- ☐ **CLASS S SHARES** (Minimum investment \$2,500)
- ☐ **CLASS D SHARES** (Minimum investment \$2,500. Available to fee-based accounts and other eligible investors as disclosed in the prospectus.)
- ☐ **CLASS I SHARES** (Minimum investment \$1,000,000 unless waived by dealer manager. Available to fee-based accounts and other eligible investors as disclosed in the prospectus.)
- ☐ **VOLUME DISCOUNT**  
 Class A, T or S Shares if purchase qualifies for a breakpoint as described in the prospectus.
- ☐ **EMPLOYEE or AFFILIATE**, check if applicable.

## B - TYPE OF OWNERSHIP

PLEASE COMPLETE EITHER SECTION 1 OR 2

## 1. NON-CUSTODIAL ACCOUNT TYPE

- ☐ **Individual Ownership**  
☐ Transfer on Death (See section C-11)
- ☐ **Joint Tenants with Rights of Survivorship\***  
☐ Transfer on Death (See section C-11)
- ☐ **Tenants in Common\***
- ☐ **Community Property\***
- ☐ **Trust (Trust Certification Required)**  
☐ Revocable ☐ Irrevocable
- ☐ **Pension or PSP (Plan Documents Required)**
- ☐ **UTMA / UGMA**  
 State of \_\_\_\_\_  
 Guardian \_\_\_\_\_
- ☐ **Corporate Ownership (Corporate Resolution Required)**  
☐ C-Corp ☐ S-Corp
- ☐ **LLC Ownership (LLC Agreement Required)**
- ☐ **Other** \_\_\_\_\_

\* All Parties Must Sign

## 2. CUSTODIAL ACCOUNT TYPE

- ☐ **Traditional IRA**
- ☐ **Beneficiary IRA**  
 Decedent Name \_\_\_\_\_  
 Date of Death \_\_\_\_\_
- ☐ **Roth IRA**
- ☐ **SEP IRA**
- ☐ **Brokerage Account**
- ☐ **Pension or PSP**
- ☐ **Other** \_\_\_\_\_
- Custodian Information (To be completed by Custodian)**
- Custodian Name** \_\_\_\_\_
- Custodian Address** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
- Custodian Tax ID #** \_\_\_\_\_
- Custodian Account #** \_\_\_\_\_
- Custodian Telephone #** \_\_\_\_\_

## C - INVESTOR INFORMATION

1. **INVESTOR/BENEFICIAL OWNER**

Investor/Trustee/Administrator/UTMA/UGMA Minor's Name

Date of Birth

First

Middle

Last

MM/DD/YYYY

2. **Social Security/Tax ID #** \_\_\_\_\_

3. **Citizenship Status** *(Required)* ☐ U.S. Citizen ☐ Resident Alien ☐ Non-Resident Alien (attach an original completed Form W-8BEN)

4. **CO-INVESTOR/BENEFICIAL OWNER**

Co-Investor/Co-Trustee/Administrator/UTMA/UGMA Guardian's Name

Date of Birth

First

Middle

Last

MM/DD/YYYY

5. **Social Security/Tax ID #** \_\_\_\_\_

6. **Citizenship Status** *(Required)* ☐ U.S. Citizen ☐ Resident Alien ☐ Non-Resident Alien (attach an original completed Form W-8BEN)

7. **If Trust/Pension/PSP or Other Entity, Please Provide Complete Title** - See Section B-1 for documentation requirements

Tax ID # \_\_\_\_\_ **OR** Social Security # \_\_\_\_\_ Date of Trust/Pension/PSP/Other \_\_\_\_\_

8. **Residence Address - Required by Law** - No P.O. Boxes \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

9. **Alternate Mailing Address** - P.O. Boxes are Acceptable \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

10. **Telephone Number** \_\_\_\_\_ ☐ Home ☐ Cell ☐ Work

11. **Transfer on Death** (Beneficiary information, if applicable) - Not available for residents of Louisiana. Individual or joint account with rights of survivorship only. Social security number optional, however **date of birth is required**. Designate whole percentages only. Must equal 100%. TOD designation shall be governed by the laws of the State of Missouri.

First name	(MI)	Last Name	SSN:	Date of Birth (MM/DD/YYYY)	<input type="checkbox"/> Primary _____%
					<input type="checkbox"/> Secondary _____%

First name	(MI)	Last Name	SSN:	Date of Birth (MM/DD/YYYY)	<input type="checkbox"/> Primary _____%
					<input type="checkbox"/> Secondary _____%

First name	(MI)	Last Name	SSN:	Date of Birth (MM/DD/YYYY)	<input type="checkbox"/> Primary _____%
					<input type="checkbox"/> Secondary _____%

First name	(MI)	Last Name	SSN:	Date of Birth (MM/DD/YYYY)	<input type="checkbox"/> Primary _____%
					<input type="checkbox"/> Secondary _____%

## D - DISTRIBUTION OPTIONS (select only one)

Please read the following section carefully.

You **are** automatically enrolled in our Distribution Reinvestment Plan (DRP) **unless** you **are** a resident of ALABAMA, ARKANSAS, IDAHO, KANSAS, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEBRASKA, NEW JERSEY, NORTH CAROLINA, OHIO, OREGON, VERMONT OR WASHINGTON. If you are a resident of ALABAMA, ARKANSAS, IDAHO, KANSAS, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEBRASKA, NEW JERSEY, NORTH CAROLINA, OHIO, OREGON, VERMONT OR WASHINGTON, you **are not** automatically enrolled in the DRP and will receive cash distributions **unless** you elect to enroll in the DRP.

### 1. Cash Distribution Election

(A) If you **are** a resident of the states listed above, you **are not** automatically enrolled in the DRP. You will receive cash distributions **unless** you elect to enroll in the DRP. If you want to receive cash distributions, complete this Section 1. If you want to enroll in the DRP, continue to Section 2(A).

(B) If you **are not** a resident of the states listed above, you **are** automatically enrolled in the DRP. If you want to elect to receive cash distributions, complete this Section 1. If you want to **remain** enrolled in the DRP, continue to Section E - Electronic Delivery.

*For Custodial held accounts, if you elect cash distributions the funds must be sent to the Custodian.*

☐ Mail to Residence Address

☐ Mail Distributions to a Third Party *(Complete Section Below)*

Name of Bank, Brokerage Firm, or Individual \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Account # \_\_\_\_\_

☐ Send Distributions via ACH

I authorize **InPoint Commercial Real Estate Income, Inc.** (the "Company") or its agent to deposit my distribution into my checking or savings account. This authorization will remain in force until I notify the Company in writing to cancel it. In the event the Company deposits funds erroneously into my account, they are authorized to debit my account for an amount not to exceed the amount of the erroneous deposit.

Financial Institution Name	Mailing Address	City	State

Your Bank's ABA Routing Number	Your Bank Account Number

☐ Checking *(Attach a pre-printed VOIDED check)*

☐ Savings *(Attach a VOIDED deposit slip)*

### 2. Distribution Reinvestment Election

(A) If you are a resident of ALABAMA, ARKANSAS, IDAHO, KANSAS, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEBRASKA, NEW JERSEY, NORTH CAROLINA, OHIO, OREGON, VERMONT OR WASHINGTON, initial below to enroll in the DRP and continue to Section E - ELECTRONIC DELIVERY.

Investor Initials

Co-Investor Initials

(B) If you are not a resident of the states listed above, you are **automatically** enrolled in the DRP. If you want to remain enrolled in the DRP, continue to Section E - Electronic Delivery.

## E - ELECTRONIC DELIVERY

Instead of receiving paper copies of the prospectus, prospectus supplements, annual reports, proxy statements, and other stockholder communications and reports, you may elect to receive electronic delivery of stockholder communications from InPoint Commercial Real Estate Income, Inc. If you would like to consent to electronic delivery, including pursuant to e-mail, please check the box below for this election.

We encourage you to reduce printing and mailing costs and to conserve natural resources by electing to receive electronic delivery of stockholder communications. By consenting below to electronically receive stockholder communications, including your account specific information (when available), you authorize us to either (i) e-mail stockholder communications to you directly or (ii) make them available on our website and notify you by e-mail when and where such documents are available.

Your consent to electronic delivery will be on an unlimited duration and you will not receive paper copies of these electronic materials unless (i) specifically requested, (ii) you inform us in writing that you revoke your consent, (iii) the delivery of electronic materials is prohibited or (iv) we, in our sole discretion elect to send paper copies of materials.

By consenting to electronic access, you will be responsible for your customary internet service provider charges and may be required to download software in connection with access to these materials.

Initials

Investor Co-Investor

I consent to electronic delivery

*(Please provide only one email address)*

E-mail Address \_\_\_\_\_

## F - INVESTOR(S) ACKNOWLEDGEMENTS AND SIGNATURES

1. The undersigned further acknowledges and/or represents (or in the case of fiduciary accounts, the person authorized to sign on such investor's behalf) the following:

**PLEASE NOTE:** Items (A) through (E) below **MUST BE INITIALED** by the investor(s), and if applicable, the trustee or administrator, from ALL states and jurisdictions. Items (F) through (W) must be initialed if you reside in one of the applicable states listed below.

**Initials**  
Investor Co-Investor

- ☐ ☐ (A) I (we) have received, not less than five **(5) business days** prior to the signing of this Subscription Agreement, the final prospectus of the Company, as supplemented.
- ☐ ☐ (B) I (we) either: (i) have a net worth (excluding home, home furnishings and automobiles) of at least \$70,000 and (without regard to investment in the Company) I (we) have gross income due in the current year of at least \$70,000; or (ii) have a net worth (excluding home, home furnishings and automobiles) of at least \$250,000. In addition to the foregoing general suitability standards, I (we) meet, and have represented as such below, the higher suitability requirements imposed by my state of primary residence as set forth in the Prospectus under "Suitability Standards." In the case of sales to fiduciary accounts, the suitability standards must be met by the beneficiary, the fiduciary account or by the donor or grantor who directly or indirectly supplies the funds for the purchase of the shares.
- ☐ ☐ (C) I am (we are) purchasing the shares for my (our) own account; or if I am (we are) purchasing shares on behalf of a trust or other entity of which I am (we are) trustee(s) or authorized agent(s), I (we) have due authority to execute the Subscription Agreement and do hereby legally bind the trust or other entity of which I am (we are) trustee(s) or authorized agent(s).
- ☐ ☐ (D) I (we) acknowledge that the shares are not liquid, there is no current market for the shares and I (we) may not be able to sell the shares.
- ☐ ☐ (E) I understand that the transaction price per share at which my investment will be executed will be made available at [www.inland-investments.com/inpoint](http://www.inland-investments.com/inpoint) and in a prospectus supplement filed with the SEC, available at [www.sec.gov](http://www.sec.gov).

I understand that my subscription request will not be accepted before the later of (i) two business days before the first calendar day of the month and (ii) three business days after the transaction price is made available. I understand that I am not committed to purchase shares at the time my subscription order is submitted and I may cancel my subscription at any time before the time it has been accepted as described in the previous sentence. I understand that I may withdraw my purchase request by notifying Inland Investor Services, through my financial intermediary or directly on the Company's toll-free, telephone line, 800-826-8228.

**Initials**  
Investor Co-Investor

**Please initial the appropriate box if you reside in one of the states listed below. In each case, these special suitability standards are in addition to the general suitability requirements above and exclude from the calculation of net worth the value of the investor's home, home furnishings and automobiles.**

- ☐ ☐ (F) For **Alabama** residents: Investors residing in Alabama may not invest more than 10% of their liquid net worth in us and our affiliates.
- ☐ ☐ (G) For **Idaho** residents: Investors residing in Idaho must have either (a) a net worth of \$85,000 and annual income of \$85,000 or (b) a liquid net worth of \$300,000. Additionally, the total investment in us shall not exceed 10% of their liquid net worth.
- ☐ ☐ (H) For **Iowa** residents: Investors residing in Iowa must have either (a) an annual gross income of at least \$100,000 and a net worth of at least \$100,000, or (b) a net worth of at least \$350,000. In addition, the aggregate investment in this offering and in the securities of other public, non-listed REITs may not exceed 10% of their liquid net worth. Investors who are accredited as defined in Regulation D under the Securities Act of 1933, as amended, are not subject to the foregoing concentration limit.
- ☐ ☐ (I) For **Kansas** residents: The Office of the Kansas Securities Commissioner recommends that an investor's aggregate investment in this offering and other similar direct participation investments not exceed 10% of the investor's liquid net worth.
- ☐ ☐ (J) For **Kentucky** residents: Investors residing in Kentucky may not invest more than 10% of their liquid net worth in our shares or in any shares of our affiliated public, non-listed REITs.
- ☐ ☐ (K) For **Maine** residents: The Maine Office of Securities recommends that an investor's aggregate investment in this offering and other similar direct participation investments not exceed 10% of the investor's liquid net worth.
- ☐ ☐ (L) For **Massachusetts** residents: Investors residing in Massachusetts must limit their aggregate investment in us and other illiquid direct participation programs to not more than 10% of their liquid net worth.
- ☐ ☐ (M) For **Missouri** residents: No more than ten percent (10%) of any one (1) Missouri investor's liquid net worth shall be invested in the securities being registered in this offering.
- ☐ ☐ (N) For **Nebraska** residents: Investors residing in Nebraska who do not meet the definition of "accredited investor" as defined in Regulation D under Securities Act of 1933, as amended, must limit their aggregate investment in this offering and in the securities of other public, non-listed direct participation programs to 10% of such investor's net worth.

Initials  
Investor Co-Investor

- ☐ ☐ (O) For **New Jersey** residents: Investors residing in New Jersey are required to have (a) a minimum liquid net worth of at least \$100,000 and a minimum annual gross income of not less than \$85,000, or (b) a minimum liquid net worth of at least \$350,000. In addition, the total investment in us, our affiliates and other public, non-listed direct investment programs (including REITs, business development companies, oil and gas programs, equipment leasing programs and commodity pools, but excluding unregistered, federally and state exempt private offerings) may not exceed 10% of an investor's liquid net worth. For purposes of New Jersey's suitability standard, "liquid net worth" is defined as that portion of net worth (total assets exclusive of home, home furnishings, and automobiles minus total liabilities) that consist of cash, cash equivalents and readily marketable securities.
- ☐ ☐ (P) For **New Mexico** residents: Investors residing in New Mexico may not invest more than 10% of their liquid net worth in our shares, shares of our affiliates and other public, non-listed REITs.
- ☐ ☐ (Q) For **North Dakota** residents: Investors residing in North Dakota must have a net worth of at least ten times their investment in us.
- ☐ ☐ (R) For **Ohio** residents: Investors residing in Ohio may not invest more than 10% of their liquid net worth in us, our affiliates and other public, non-listed REITs. For purposes of Ohio's suitability standard, "liquid net worth" is defined as that portion of net worth (total assets exclusive of home, home furnishings, and automobiles minus total liabilities) that is comprised of cash, cash equivalents, and readily marketable securities.
- ☐ ☐ (S) For **Oregon** residents: Investors residing in Oregon may not invest more than 10% of their net worth in this offering.
- ☐ ☐ (T) For **Pennsylvania** residents: Investors residing in Pennsylvania may not invest more than 10% of their net worth in us. The offer and sale of our common stock to persons in the Commonwealth of Pennsylvania is governed by Pennsylvania law.
- ☐ ☐ (U) For **Puerto Rico** residents: Investors residing in Puerto Rico may not invest more than 10% of that investor's liquid net worth in us, our affiliates, and in other public, non-listed REITs.
- ☐ ☐ (V) For **Tennessee** residents: Investors residing in Tennessee who are not "accredited investors" as defined in 17 C.F.R. § 230.501 may not invest more than 10% of their net worth in us.
- ☐ ☐ (W) For **Vermont** residents: Investors residing in Vermont who are not "accredited investors" as defined in 17 C.F.R. § 230.501 may not purchase an amount of shares in this offering that exceeds 10% of the investors' liquid net worth.

As used above, "affiliates" means Inland Real Estate Income Trust, Inc. and Inland Residential Properties Trust, Inc. but does not include (i) InvenTrust Properties Corp., a REIT previously sponsored by Inland Real Estate Investment Corporation ("IREIC"), which internalized its management in March 2014, (ii) IRC Retail Centers LLC, an entity previously sponsored by IREIC, or (iii) Retail Properties of America, Inc., a REIT previously sponsored by IREIC, which is publicly traded on the New York Stock Exchange.

2. **THE UNDERSIGNED CERTIFIES**, under penalties of perjury, (i) that the taxpayer identification number shown on the Subscription Agreement is true, correct and complete, (ii) that I am (we are) not subject to backup withholding either because I (we) have not been notified that I am (we are) subject to backup withholding as a result of a failure to report all interest or distributions, or the Internal Revenue Service has notified me (us) that I am (we are) no longer subject to backup withholding, (iii) I am a U.S. citizen or other U.S. person and (iv) the FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. See Form W-9 instructions at <http://www.irs.gov>

Exempt payee code (if any) \_\_\_\_\_ Exemption from FATCA reporting code (if any) \_\_\_\_\_

\_\_\_\_\_  
**Signature** - Investor/Trustee/Administrator/POA\*

\_\_\_\_\_  
**Print Name** - Investor/Trustee/Administrator/POA

\_\_\_\_\_  
MM/DD/YYYY

\_\_\_\_\_  
**Signature** - Co-Investor/Co-Trustee (If Applicable)

\_\_\_\_\_  
**Print Name** - Co-Investor/Co-Trustee (If Applicable)

\_\_\_\_\_  
MM/DD/YYYY

\_\_\_\_\_  
**Signature** - Custodian (If Applicable)

\_\_\_\_\_  
**Print Name** - Custodian (If Applicable)

\_\_\_\_\_  
MM/DD/YYYY

**\*Must Include Supporting Document(s)**

- ☐ I am completing and signing this application pursuant to a **power-of-attorney** from the investor. I hereby certify that such power-of-attorney is legally valid and includes within its scope my completion and execution of this application on behalf of the investor. For Washington residents, except in the case of fiduciary accounts, the investor may not grant any person a power-of-attorney to make such representations on his or her behalf.

## G - SELLING PARTY ACKNOWLEDGEMENT AND SIGNATURE

To be completed by the Registered Representative (RR) of the participating Broker Dealer (BD) or the Investment Advisor Representative (IAR) of the participating Registered Investment Advisor (RIA).

RR/IAR Name(s) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

BD or RIA Firm Name \_\_\_\_\_

Rep ID # *(Required)* \_\_\_\_\_ Branch ID # *(Required)* \_\_\_\_\_

Client Account # \_\_\_\_\_ IAR CRD # \_\_\_\_\_

The undersigned confirm on behalf of the Broker Dealer or Registered Investment Advisor that they (i) have reasonable grounds to believe that the information and representations concerning the investor identified herein are true, correct and complete in all respects; (ii) have discussed such investor's prospective purchase of shares with such investor; (iii) have advised such investor of all pertinent facts with regard to the limited liquidity and marketability of the shares; (iv) have delivered a current prospectus and related supplements, if any, to such investor; (v) have reasonable grounds to believe that the investor is purchasing these shares for his or her own account; (vi) if applicable, have discussed such higher suitability as may be required or recommended by certain states as set forth in Section F of this subscription agreement; (vii) have reasonable grounds to believe that the purchase of shares is a suitable investment for such investor, 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 loss that may occur with respect thereto; and (viii) understand that the sale of shares in accordance with the prospectus is subject to any applicable enhanced standard of conduct, including, but not limited to, the "best interest" standard applicable under Rule 15l-1 under the Securities Exchange Act of 1934.

**BD Only:** The undersigned Registered Representative further represents and certifies that, in connection with this subscription for shares, he (she) has complied with and has followed all applicable policies and procedures under their firm's existing Anti-Money Laundering Program and Customer Identification Program.

\_\_\_\_\_  
**Signature - RR or IAR *(Required)***

\_\_\_\_\_  
MM/DD/YYYY

\_\_\_\_\_  
**Signature - Broker Dealer Principal *(If Required by Broker Dealer)***

\_\_\_\_\_  
MM/DD/YYYY

**For Non-Custodial Ownership Accounts:** Please send the completed and executed subscription agreement and your check made payable to:  
**INPOINT COMMERCIAL REAL ESTATE INCOME, INC. c/o INLAND** to the address below.

**For Custodial Ownership Accounts:** Checks should be made payable to the custodian and sent along with the completed and executed subscription agreement to the custodian.

**Regular Mail** - P.O. Box 219182, Kansas City, Missouri 64121-9182

**Overnight Delivery** - 430 W. 7th Street, Kansas City, Missouri 64105

**Fax Delivery** - 855.223.2479

**E-mail Delivery** - [Inland@dtsystems.com](mailto:Inland@dtsystems.com)

**Inland Investor Services** - 800.826.8228

**Wiring Instructions:**

UMB Bank

ABA # 101000695

1008 Oak Street

DDA Account # 9871975967

Kansas City, MO 64106

FBO: Name of Stockholder