

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* <u>Eagle Point Credit Management LLC</u> (Last) (First) (Middle) 600 STEAMBOAT RD, SUITE 202 (Street) GREENWICH CT 06830 (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 12/08/2021	3. Issuer Name and Ticker or Trading Symbol <u>OFS Credit Company, Inc. [OCCI]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
6.875% Series A Term Preferred Stock due 2024	1,378	I ⁽¹⁾⁽²⁾	See footnotes
6.125% Series C Term Preferred Stock due 2026	43,577	I ⁽¹⁾⁽²⁾	See footnotes
5.25% Series E Term Preferred Stock due 2026	310,000	I ⁽¹⁾⁽²⁾	See footnotes

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date				

1. Name and Address of Reporting Person* <u>Eagle Point Credit Management LLC</u> (Last) (First) (Middle) 600 STEAMBOAT RD, SUITE 202 (Street) GREENWICH CT 06830 (City) (State) (Zip)
1. Name and Address of Reporting Person* <u>Eagle Point CIF GP I LLC</u> (Last) (First) (Middle) 600 STEAMBOAT ROAD, SUITE 202 (Street) GREENWICH CT 06830 (City) (State) (Zip)

1. Name and Address of Reporting Person *

Eagle Point DIF GP I LLC

(Last) (First) (Middle)

600 STEAMBOAT ROAD, SUITE 202

(Street)

GREENWICH CT 06830

(City)

(State)

(Zip)

Explanation of Responses:

1. As of December 8, 2021, the shares were directly held by certain private investment funds (the "Funds") managed by Eagle Point Credit Management ("EPCM"). Eagle Point CIF GP I LLC and Eagle Point DIF GP I LLC (the "General Partners") each serve as general partner to one of the Funds. Accordingly, EPCM and the General Partners could be deemed to have an indirect pecuniary interest in the securities held by the applicable Funds.

2. Each of the Reporting Persons hereby disclaims beneficial ownership of the securities described in this report pursuant to Rule 16a-1(a)(4) under the Securities Exchange Act of 1934 and the inclusion of these securities in this report shall not be deemed an admission of beneficial ownership of any of the reported securities for purposes of Section 16 or for any other purpose.

/s/ Thomas P. Majewski,
Chief Executive Officer of
each of Eagle Point Credit
Management LLC, Eagle
Point CIF GP I LLC, and
Eagle Point DIF GP I LLC

12/13/2021

** 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 5 (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.