Edgar Filing: Main Street Capital CORP - Form 4

Main Street	Capital CORP												
Form 4													
October 26,	2015												
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL				
Washington, D.C. 20549								OMB Number:	3235-0287				
	Theck this box								Expires:	January 31,			
subject t	if no longer subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							ERSHIP OF	Estimated average				
Section	SECURITIES							burden hours per					
Form 4 Form 5	Form 4 or					~	_		response	0.5			
obligatio	1							•	Act of 1934,				
may con	tinue.			-		Company			1935 or Section				
<i>See</i> Instr 1(b).	ruction	50(II)	of the fi	ivestii	ICIII	Company	Act	01 1940)				
1(0).													
(Print or Type	Responses)												
	Address of Reporting	Person [*]	2. Issue	er Name	e and	I Ticker or T	Trading	>	5. Relationship of I	Reporting Pers	on(s) to		
French Artl	Symbol						Issuer						
	Main S	treet (Capi	tal CORP	[MA	.IN]	(Check all applicable)						
(Last) (First) (Middle)			3. Date of Earliest Transaction										
		(Month/Day/Year)						_X_ Director10% Owner					
1300 POST	10/15/2015						Officer (give title Other (specify below) below)						
	4. If Amendment, Date Original						6. Individual or Joint/Group Filing(Check						
			Filed(Mo			-			Applicable Line)	1			
									X Form filed by On Form filed by Mo				
HOUSTON	I, TX 77056]	Person	ore than One Rej	porting		
(City)	(State)	(Zip)	Tab	ole I - N	on-I	Derivative S	ecurit	ies Acqu	ired, Disposed of,	or Beneficiall	y Owned		
1.Title of	2. Transaction Date	2A. Deem	ed	3.		4. Securitie	s Acqu	uired (A)	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)	Execution	Date, if	Date, if Transactionor Disposed of (D)					Securities	Ownership	Indirect		
(Instr. 3)		any (Month/D	av/Vear)	Code (Instr.					Beneficially Owned		Beneficial Ownership		
		(Wonth D	ay/rear)	(msu.	0)				Following	or Indirect	(Instr. 4)		
							(A)		Reported	(I)			
							or		Transaction(s) (Instr. 3 and 4)	(Instr. 4)			
~				Code	V	Amount	(D)	Price	(Instr. 5 and 4)				
Common	10/15/2015			P (1)	V	258.859	А	\$	40,934.9638	Ι	Flying F,		
Stock								28.29			LLC (2)		
Common Stock	10/15/2015			P <u>(1)</u>	V	46.28	А	\$ 28.29	10,285.867	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
Repor	rting O	wners		Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Edgar Filing: Main Street Capital CORP - Form 4

Relationships **Reporting Owner Name / Address** 10% Owner Officer Director Other French Arthur L. 1300 POST OAK BLVD. Х STE. 800 HOUSTON, TX 77056 Signatures /s/ Jason B. Beauvais as Attorney-in-Fact for Arthur L. 10/22/2015 French

**Signature of Reporting Person

Explanation of Responses:

- If the form is filed by more than one reporting person, see Instruction 4(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).
- The reporting person acquired these shares under a dividend reinvestment plan, pursuant to a dividend reinvestment transaction exempt (1) from Section 16 under Rule 16a-11.
- (2) Flying F, LLC is wholly owned by the reporting person and his wife.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Date