FORM 4 Check this box if no

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Washington, D.C. 20549
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB APPROVAL
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longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

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

SECURITIES

(Print or Type Respon	nses)											
Name and Address of Reporting Person * Reppert Todd A.			2. Issuer Name and Ticker or Trading Symbol Main Street Capital CORP [MAIN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			
1300 POST OAK	0	3. Date of Earliest Transaction (Month/Day/Year) 07/02/2012						X Officer (give title Other (specify below) below) President				
HOUSTON, TX		4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)		Table I - Non-Derivative Securities Acquir						red, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Exect any	Deemed ution Date, if hth/Day/Year)	3. Transact Code (Instr. 8		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		D)	Beneficially Owned Form: Following Reported Direct (
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)	or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock	07/02/2012			F(1)		4,841	D	\$ 24.9	556,783.795	D		
Reminder: Report on	a separate line for ea	nch cla	ss of securitie	s benefic	ially	owned						

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	2.	Transaction	3A. Deemed	4.	5.		Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature	
Derivative	Conversion	Date	Execution Date, if	Transaction	Numl	oer	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code	of		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Deriv	ative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative				Secur	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)	
	Security				Acqu	ired			4)			Following	Direct (D)		
					(A) o	r						Reported	or Indirect		
					Dispo	osed						Transaction(s)	(I)		
					of (D)						(Instr. 4)	(Instr. 4)		
					(Instr	. 3,									
					4, and	15)									
										Amount					
							.								
							Date	Expiration Date	Title	Number					
							Exercisable	Date		of					
				Code V	(A)	(D)				Shares					

Reporting Owners

Donoutino Orano None / Adduses	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Reppert Todd A. 1300 POST OAK BLVD. STE. 800 HOUSTON, TX 77056	X		President					

Signatures

/s/ Rodger A. Stout as Attorney-in-Fact for Todd A. Reppert	07/03/2012
Signature of Reporting Person	Date

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).
- (1) Shares used to satisfy tax withholding requirements pursuant to the Main Street Capital Corporation 2008 Equity Incentive Plan.

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.