FORM 4

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

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response...

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN 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

(Print or Type	Respons	ses)												
Name and Address of Reporting Person * Griffin Jon Kevin				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				
(Last) (First) (Middle) 1300 POST OAK BLVD., STE. 800				3. Date of Earliest Transaction (Month/Day/Year) 03/14/2014						Officer (give title Other (specify below)				
				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City)	(S	tate) (Zip)		Table I -	Non-De	riva	tive Secu	rities	Acqui	red, Disposed of,	or Beneficia	lly Owne	d	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owner Following Report Transaction(s)	ed Form: ed Direct (I or Indire	/	direct ficial ership	
						V	Amount	or	Price	(Instr. 3 and 4)	(I) (Instr. 4)		
Common St	tock (03/14/2014			P ⁽¹⁾	V	22.003	A	\$ 34.36	9,354.19	D			
Common St	tock (03/14/2014			P ⁽¹⁾	V	13.93	A	\$ 34.36	9,368.12	D			
Reminder: Rep		a separate line for e	ach cl	ass of securition	es benefi	cially	y owned							
						in re	formation	on co	ntaine spond	nd to the collection and in this form ar unless the form control number.	e not displays a	(C 1474 (9-02)	
					-		-			eficially Owned				
1. Title of 2.		3. Transaction		uts, calls, wa	4.	opuc	5.				Γitle and	3. Price of	f 9. Number o	
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1. Title of	2.	Transaction	3A. Deemed	4.	5.		6. Date Exe	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n Nui	nber	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)	Der	ivative			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				Sec	urities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				Acc	uired			4)			Following	Direct (D)	
					(A)	or						Reported	or Indirect	
					Dis	posed						Transaction(s)	(I)	
					of (D)						(Instr. 4)	(Instr. 4)	
					(Ins	tr. 3,								
					4, a	nd 5)								
										Amount				
							D .	- · ·		or				
							Date	Expiration Date	Title	Number				
							Exercisable	Date		of				
				Code V	(A)	(D)				Shares				

Reporting Owners

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address		10% Owner	Officer	Other				
Griffin Jon Kevin 1300 POST OAK BLVD. STE. 800 HOUSTON, TX 77056	X							

Signatures

/s/ Jason B. Beauvais as Attorney-in-Fact for J. Kevin Griffin	03/26/2014
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) The reporting person acquired these shares under a dividend reinvestment plan, pursuant to a dividend reinvestment transaction exempt from Section 16 under Rule 16a-11.

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.