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 Re	esponse	es)														
Name and Address of Reporting Person * Griffin Jon Kevin				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) 09/15/2014						Officer (give title Other (specify below)						
(Street) 4. If Amendr Filed(Month/D					ment, Date Original 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)	(Sta	te) (Zip)		Table I -	Non-De	riva	tive Secu	rities	Acqui	red, Disposed	of, or l	Beneficia	ılly Ow	vned		
1.Title of Securi (Instr. 3)	Da	ate	ay/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) Transaction Code (Instr. 8) (Instr. 3, 4		d (A) d of (, 4 an (A) or	(D) d 5)	Following Rep Transaction(s) (Instr. 3 and 4)	ecurities deneficially Owned following Reported fransaction(s) Ownershi Form: Direct (D) or Indirect		ship of Be D) Or (In	enefic wner	rect rial ship				
Common Stoo	ck 09	9/15/2014			Code P(1)	V	Amount 29.106	` /	Price \$ 32.54	12 269 521		D				
Common Stoo	ek 09	9/15/2014			P ⁽¹⁾	V	23.58	A	\$ 32.54	12,293.101		D				
Reminder: Repo directly or indire		separate line for e	ach cl	ass of securitie	es benefic	cially	y owned									
						in re	formation	on co	ontaine spond	nd to the colle ed in this form unless the fo control numb	are r	not		SEC 1 (9	474 -02)	
					-		-	- 1		eficially Owned	l					
		,		outs, calls, wa	1	ptio								-		
1. Title of 2.		3. Transaction	3 <i>A</i>	A. Deemed	4.		5.			Exercisable	7. Titl				9. Number of	10.

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 Nu	nber	and Expirati	ion 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	quired			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 .	F		or				
							Date	Expiration Date	Title	Number				
							Exercisable	Date		of				
				Code V	(A)	(D)				Shares				

Reporting Owners

Reporting Owner Name / Address		Relationsh		
Reporting Owner Name / Address	Director	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	09/22/2014
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.