FORM 4

Section 16. Form 4 or

Form 5 obligations

may continue. See

Instruction 1(b).

Check this box if no longer subject to

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL OMB 3235-Number: 0287 Estimated average burden hours per response...

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 Resp	oonses)													
1. Name and Addr French Arthur I	Symbol Main Street Capital CORP [MAIN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director10% Owner							
1300 POST OA	3. Date of Earliest Transaction (Month/Day/Year) 12/24/2014						Officer (give title Other (specify below)							
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)	(State) (Zi	ip)	Table I	- Non-I	Deriv	ative Secu	rities	Acquir	red, Disposed	of, or I	Beneficial	lly Owned	l	
1.Title of Security (Instr. 3)	Date Ex (Month/Day/Year) any		eemed ion Date, if n/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (I (Instr. 3, 4 and 5)			D) Securities Beneficially Owned Following Reported		Form: Direct (I		irect icial rship	
				Code	v	Amount	(A) or (D)		(Instr. 3 and 4)		or Indire (I) (Instr. 4)	ect (Instr.	4)	
Common Stock	12/24/2014			P ⁽¹⁾	V	335.8123	3 A	\$ 29.94	37,388.709	6	I	Flyin LLC		
Common Stock	12/24/2014			P ⁽¹⁾	V	34.22	A	\$ 29.94	4,714.975		D			
Reminder: Report of directly or indirectl	on a separate line for	each cl	ass of securi	ties bene	eficia	lly owned								
					į	information	n co o res	ntaine pond (d to the colle d in this form unless the fo control numb	n are n rm dis	ot	(1474 9-02)	
	Table II		ative Securi outs, calls, w	-		_			ficially Owned	ı				
1. Title of 2. Derivative Conver	3. Transaction Date (Month/Day/Y	Ex	A. Deemed ecution Date	*	nsac		er a	nd Exp	Exercisable iration Date	7. Title Amou	nt of l	Derivative	9. Number of Derivative	10. Own

1. Title of	2.	3. Transaction	3A. Deemed	4.	5	i.		Date Exer	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on N	Numbe	r	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	o	of		(Month/Day	/Year)	Unde	erlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Г	Derivat	ive			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				S	Securiti	ies			(Instr	: 3 and		Owned	Security:	(Instr. 4)
	Security				Α	Acquir	ed			4)			Following	Direct (D)	
					()	A) or							Reported	or Indirect	
					Γ	Dispos	ed						Transaction(s)	(I)	
					О	of (D)							(Instr. 4)	(Instr. 4)	
					(]	Instr. 3	3,								
					4	, and 5	15)								
											Amount				
								Date	Expiration		or				
								Exercisable	Expiration Date	Title	Number				
								LACICISAUIC	Date		of				
				Code	V ((A)	D)				Shares				

Reporting Owners

Denouting Owner Name / Address	Relationships								
Reporting Owner Name / Address		10% Owner	Officer	Other					
French Arthur L. 1300 POST OAK BLVD.	X								
STE. 800 HOUSTON, TX 77056									

Signatures

/s/ Jason B. Beauvais as Attorney-in-Fact for Arthur L. French	01/07/2015
**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.
- (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.