### FORM 4 Check this box if no

longer subject to

Section 16. Form 4 or

Form 5 obligations

may continue. See

Instruction 1(b).

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

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

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

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Smith Brent D. Syn				•						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) (First) (Middle) 1300 POST OAK BLVD., SUITE 800				3. Date of Earliest Transaction (Month/Day/Year)						Officer (give titleOther (specify below) below)  CFO, Treasurer				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)				
	)	Table I -	Non-De	riva	tive Sec	urities		Form file	d by More	than One Rep	orting Perso			
2. Transaction Date (Month/Day/Year)	Exect any	Deemed ution Date, if	3. Transaci Code	tion	4. Secu Acquire Dispose (Instr. 3	rities ed (A) ed of (B, 4 and (A) or	or (D) ad 5)	5. Amount Securities Beneficial Following Transaction	nt of lly Own g Report on(s)	6. Owner Form: Direct or Indi	7. N of Ir Bend (D) Own rect (Inst	ature adirect eficial nership		
01/15/2015			P(1)	V	20.881	A	\$ 28.19	13,525.8	869	D				
Table II -			-	in re cu red,	formati equired urrently Dispose	ion co to re valid	ontaine spond ( d OMB ( or Bene	d in this f unless th control n ficially Ov	form ar e form umber	e not displays		C 1474 (9-02)		
3. Transaction	7.		4.	ptic	5.	·crtib			e 7.	Title and	8. Price o	of 9. Number of	10.	11. Natur
ssion Date (Month/Day/Ye f ive	ar) an	y	Code	Code				and Expiration Date (Month/Day/Year)		nount of derlying curities sstr. 3 and	Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported	Security: Direct (D) or Indirect	of Indirect Beneficial Ownershi (Instr. 4)
							Date Exercisa	Expira	ation Tit	Amount or le Number of				
i ci	(First) (Middl AK BLVD., SUITE  (Street)  X 77056  (State) (Zip)  2. Transaction Date (Month/Day/Year)  1. 01/15/2015  Table II - 1  (Corriginal of the control of the cont	(First) (Middle)  AK BLVD., SUITE 800  (Street)  (X 77056 (State) (Zip)  2. Transaction Date (Month/Day/Year)  O1/15/2015  Table II - Deriva (e.g., p	Symbol Main Stree  (First) (Middle) AK BLVD., SUITE 800  (Street) 4. If Amendr Filed(Month/Day/O1/15/2015  (State) (Zip) Table I -  2. Transaction Date (Month/Day/Year)  (Month/Day/Year) 2A. Deemed Execution Date, if any (Month/Day/Year)  Table II - Derivative Securities (e.g., puts, calls, was any (Month/Day/Year)  Table II - Derivative Securities (e.g., puts, calls, was any (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year) 3A. Deemed Execution Date, any (Month/Day/Year)	Symbol Main Street Capital Month/Day/Year)  4. If Amendment, Day Filed (Month/Day/Year)  2. Transaction Date, if Code (Month/Day/Year)  4. If Amendment, Day Filed (Month/Day/Year)  4. Transaction Date, if Code (Month/Day/Year)  5. Table II - Derivative Securities Acquital Main Street Capital Main Street C	Symbol Main Street Capital Companies (Month/Day/Year)  (Street) 3. Date of Earliest Transaction (Month/Day/Year)  (Street) 4. If Amendment, Date Of Filed(Month/Day/Year)  (State) (Zip) Table I - Non-Derivative Securities beneficially.  2. Transaction Date (Month/Day/Year)  (Month/Day/Year) 2. Transaction Date (Month/Day/Year)  (Month/Day/Year) 3. Transaction Code (Instr. 8)  Code V  P(1) V  Table II - Derivative Securities beneficially.  Print received (e.g., puts, calls, warrants, option Date (Month/Day/Year)  3. Transaction Date (e.g., puts, calls, warrants, option Date (Month/Day/Year)  (Month/Day/Year) 3. Transaction Date (e.g., puts, calls, warrants, option Date (Month/Day/Year)  (Month/Day/Year) 4. If Amendment, Date Of Filed(Month/Day/Year)  3. Transaction Date (e.g., puts, calls, warrants, option Date (Month/Day/Year)  (Month/Day/Year) 4. If Amendment, Date Of Filed(Month/Day/Year)  A. Deemed Execution Date, if Transaction Code (Instr. 8)	Symbol   Main Street Capital CORP [Nath BLVD., SUITE 800     (First)	Symbol   Main Street Capital CORP [MAIN   Main Street Capital CORP [Main S	Symbol   Main Street Capital CORP [MAIN]   In the content of the	Symbol   Main Street Capital CORP [MAIN]   Size	Symbol   Main Street Capital CORP [MAIN]   Susuer   (Check Director   Life   Life	Symbol   Main Street Capital CORP [MAIN]   Issuer   (Check all applicable Incomplete   Issuer   (Check all applicable Incomplete   Issuer   (Check all applicable Incomplete   Issuer   Issuer   Issuer   (Check all applicable Incomplete   Issuer   Issuer   Issuer   (Check all applicable Incomplete   Issuer   Issuer   Issuer   Issuer   Issuer   Issuer   (Check all applicable Incomplete   Issuer   Isu	Symbol   Main Street Capital CORP [MAIN]   Issuer (Check all applicable)   Director   10% Owner   10	Symbol   Main Street Capital CORP [MAIN]   Surector   10% Owner   10% Owner	Symbol   Main Street Capital CORP [MAIN]   Issuer   Check all applicable)   Direct Check   Direct Ch

Donoutino Orano None / Adduses	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Smith Brent D.							
1300 POST OAK BLVD.			CFO, Treasurer				
SUITE 800			Cro, Heasurer				
HOUSTON, TX 77056							

## **Signatures**

/s/ Jason B. Beauvais as Attorney-in-Fact for Brent D. Smith	01/22/2015
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.

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.