FORM 4	4
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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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

#### 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)												
1. Name and Address of Reporting Person – French Arthur L.			2. Issuer Name <b>and</b> 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	BLVD., ST	(Middle) E. 800	3. Date of Earlies 08/14/2015	t Transact	ion (N	Month/Day/	Year)	-	Officer (give title below)     Other (specify below)				
HOUSTON, TX 7'	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)	(Zip)	Та	ble I - No	n-Dei	rivative Sec	urities	Acqui	ed, Disposed of, or Beneficially	Owned			
1. Title of Security     2. Transaction       (Instr. 3)     Date       (Month/Day/Year		Date (Month/Day/Year)	2A. Deemed Execution Date, if any	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		f (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	Ownership of Ind Form: Benef	Beneficial		
			(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 and 4)	icable) 10% Owner Other (specify bi- g(Check Applica person y <b>Owned</b> 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) t	Ownership (Instr. 4)		
Common Stock		08/14/2015		P <mark>(1)</mark>	v	239.0068	А	\$ 29.43	40,425.1903		Flying F, LLC <mark>(2)</mark>		
Common Stock		08/14/2015		P <u>(1)</u>	v	42.73	А	\$ 29.43	9,194.727	D			

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 1474 (9-02)

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	Nun	nber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of	f		and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	D	eriva	tive	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Se	ecurit	ties			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				А	cquir	ed			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(A	A) or				4)			0	Direct (D)	
						ispos	ed						· F · · · · ·	or Indirect	
						f (D)							Transaction(s)	< / <	
						nstr.	1						(Instr. 4)	(Instr. 4)	
					4,	, and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Date		of				
				Code V	()	A) (	(D)				Shares				

## **Reporting Owners**

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

## Signatures

 /s/ Jason B. Beauvais as Attorney-in-Fact for Arthur L. French
 08/21/2015

 \*\*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.