# FORM 4

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

OMB APPROVAL						
DMB Number:	3235-0287					
Estimated average burden						
nours per respon	se 0.5					

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 Ty	pe Response	es)																
1. Name and Address of Reporting Person *- Hartman Curtis L.					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last		(First)	0	Middle)		Main Street Capital CORP [MAIN]							Director 10% Owner					
1300 POST OAK BLVD., STE. 800					3. Date of Earliest Transaction (Month/Day/Year) 08/15/2016								X Officer (give title below) Other (specify below) Vice Chairman, CCO, and SMD					
(Street)			4. If	4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line)							
HOUSTON, TX 77056												_X_Form filed by One Reporting PersonForm filed by More than One Reporting Person						
	(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui								lired, Disposed of, or Beneficially Owned					
					A							nt of Securit	6.	7. Nature				
(Instr. 3)			Date (Month/I		Execution Date, if any			Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)		Beneficially Owned Following Reported Transaction(s)			Ownership Form:	of Indirect Beneficial		
						th/Day/Yea		()		(,	1	ĺ	(Instr. 3 and 4)			Direct (D)	Ownership	
											(A) or					or Indirect (I)	(Instr. 4)	
								Code	V	Amount	(D)	Price	;			(Instr. 4)		
Common	Stock		08/15/2	2016				P(1)	V	91.272	A	\$ 34.3:	237,604	.6961		D		
Common	nmon Stock 08/15/2016		2016				P <sup>(1)</sup>	V	37.9735	A	\$ 34.3:	237,642	,642.6696		D			
Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.  Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.  SEC 1474 (9- contained in this form are not required to respond unless the form displays a currently valid OMB control number.																		
													ally Owned	i				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		/Year)	3A. Deemed Execution Da	ate, if	4. Transactic	Transaction Code		er 6.	Date Exer d Expiration on the Conthesia of the Control o	cisable on Date	7. Ar Ur Se	Title and mount of aderlying curities astr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownersh Form of Derivativ Security Direct (I or Indire	Ownership (Instr. 4) Oct	
						Code	V	(A) (D)		te ercisable	Expirati Date	ion Tit	Amount or Number of Shares	or e Number of				
Reporting Owners																		
Dono	Owner N	ma / Add				Relatio	nsl	hips										
Keporting	Reporting Owner Name / Address Director 10% Own		vner	ner Officer					Other									
STE. 800	ST OAK B					Vice Cha	airı	nan, CC	O, a	nd SMD								

## Signatures

/s/ Jaso	on B. Beauvais as Attorney-in-Fact for Curtis L. Hartman	08/22/2016
	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-

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.