FORM 4

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

| OMB APPROVAL | | | | | | | |
|--------------------------|--------|--|--|--|--|--|--|
| OMB 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 Type Respons | es) | | | | | | | | | | | | | | | |
|--|---|----------------------------------|-------------------|--|--------------------|-----------------------------|--|---------------------------|--------------|---------------------------|--|--------------------|---|--|----------------------------------|--|
| Name and Address of Reporting Person * Martin Shannon | | | | 2. Issuer Name and Ticker or Trading Symbol Main Street Capital CORP [MAIN] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
| 1300 POST OAK BLVD., STE. 800 (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/15/2017 | | | | | | | | r (give title belo | ef Accounting | Other (specify | pelow) | |
| (Street) | | | 4. If A | 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 | | | | | |
| HOUSTON, TX 77 | (State) | (Zip) | | | | | | | | | | | | | | |
| | | | | | | | 1 | | | | | | Beneficially | | | |
| (Instr. 3) | | ransaction : nth/Day/Year) |) any | tion Date, if | Code (Instr. 8) | (A) or Disp (Instr. 3, 4 | | Dispos | posed of (D) | | D) Beneficially Owned Following Reported Transaction(s) | | | Form: | 7. Nature of Indirect Beneficial | |
| | | | (Month/Day/Year | | Code | V | Amoun | (A) | | Price | (Instr. 3 and 4) | | | Direct (D) or Indirect (I) (Instr. 4) | Ownership (Instr. 4) | |
| Common Stock | 02/3 | 15/2017 | | | J(1) | | 59.416 | | \$ | 37.29 | 30,926.8 | 809 | | D | | |
| Reminder: Report on a indirectly. | separate line for ea | ch class of sec | urities b | eneficially of | owned dire | ctly o | r | | | | | | | | | |
| | | | | ive Securiti ts, calls, wa | es Acquire | cont the f | tained in form dis | n this splay of, or | s for s a | m are curre eficial | not req | uired to re | formation espond un ntrol numb | less | EC 1474 (9- 02) | |
| 1. Title of Derivative Security (Instr. 3) 1. Title of Derivative Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year | 3A. Deemed Execution D | ate, if | 4. Fransaction Code (Instr. 8) | 5. Number of | 6. Dand | 6. Date Exercisa and Expiration I (Month/Day/Yea | | Date A U So | | ttle and bunt of erlying arities r. 3 and | | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownersl Form of Derivati Security Direct (I or Indire | Ownershi (Instr. 4) | |
| | | | | Code V | (A) (D) | Date Exe | | Expir Date | atior | ¹ Title | Amount or Number of Shares | | | | | |
| Reporting C | wners | | | · | | | | | | | | | | | · | |
| Reporting Owner Name / Address | | | | Relationships | | | | | | | | | | | | |
| Martin Shannon 1300 POST OAK BLVD., STE. 800 HOUSTON, TX 77056 | | | VP, Chief Account | | | ounti | ing Offi | icer | Othe | er | | | | | | |
| Signatures /s/ Jason B. Beauva | uis as Attornev-ir | -Fact for Sh | annon | Martin | (|)2/27 | ¹ /2017 | | | | | | | | | |

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Signature of Reporting Person

- ** 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.

Date

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.

