# FORM 4

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

OMB APPR	OVAL
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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).

#### 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

1. Name and Address of Reporting Person * French Arthur L.			2. Issuer Name and Ticker or Trading Symbol  Main Street Conital COPP IMAIN!						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last) (First) (Middle) 1300 POST OAK BLVD., 8TH FLOOR				Main Street Capital CORP [MAIN]  3. Date of Earliest Transaction (Month/Day/Year) 05/15/2017					_X_ Direct	tor r (give title belo	w)	10% Owner Other (specify l	pelow)	
(Street) HOUSTON, TX 77056				4. If Amendme	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)	7	able I - No	n-De	rivative S	ecurities	Acqui	red, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		Code (Instr. 8)		n 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			6. Ownership Form:	7. Nature of Indirect Beneficial
				(Month/Day/Yea	Code	V	Amount	(A) or (D)	or			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
ommon	Stock		05/15/2017		<u>J(1)</u>	V	213.194	3 A	\$ 38.4	45,429.4256		I	Flying F, LLC (2)	
ommon	Stock		05/15/2017		<u>J(1)</u>	V	52.219	A	\$ 38.49	15,528.	579		D	
eminder: I	Report on a	separate line	for each class of sec	curities beneficiall	y owned di	rectly	or							
,						COI	ntained ir	this fo	rm are	e not req	ection of in uired to re d OMB cor	spond un	less	EC 1474 (9- 02)
				Derivative Secur						lly Owned	l			
ecurity nstr. 3)	Conversion	e (Month/Day/	Execution Donth/Day/Year) any	Date, if Transaction Code	5. Numb	er 6. an (Mes	. Date Exercisabl nd Expiration Da Month/Day/Year)		7. Tanda Ama	nount of iderlying curities str. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivati Security Direct (I or Indire	Ownershi (Instr. 4) D) ect
				Code	J (A) (T	Ex	ate cercisable	Expiration Date	n Title	Amount or Number of				
erivative ecurity nstr. 3)	Conversion or Exercise Price of Derivative	Date	Execution I any	Date, if Transactic Code (/Year) (Instr. 8)	on of Derivatir Securities Acquired (A) or Disposed of (D) (Instr. 3,	an (Mes d	d Expiration of the following of the following the followi	on Date Year) Expiration	Amo Und Secu (Inst 4)	Amount or Number	Derivative Security	Derivative Securities Beneficially Owned Following Reported Transaction	y   1   1   1   1   1   1   1   1   1	Owners Form of Derivati Security Direct ( or Indirect)

### **Reporting Owners**

Daniel Company	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
French Arthur L. 1300 POST OAK BLVD. 8TH FLOOR HOUSTON, TX 77056	Х						

## **Signatures**

/s/ Jason B. Beauvais as Attorney-in-Fact for Arthur L. French	05/23/2017
**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.