FORM 4

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

| OMB APPROVAL | | | | | | |
|--------------------------|-----------|--|--|--|--|--|
| DMB Number: | 3235-0287 | | | | | |
| Estimated average burden | | | | | | |
| ours per response | | | | | | |

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 | s) | | | | | | | | | | | | |
|--|-------------|---------------|--|---|-------------|------------|---|---|------------------|---|---|---|---|------------|
| 1. Name and Address of Reporting Person * French Arthur L. | | | 2. Issuer Name and Ticker or Trading Symbol Main Street Capital CORP [MAIN] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
| (Last) (First) (Middle) 1300 POST OAK BLVD 8TH FLOOR | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/26/2018 | | | | | give title belo | | Other (specify b | pelow) | | | |
| (Street) | | | 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 | | | | | | | |
| HOUSTC | N, TX 770 |)56 | | | | | | | | | a of more man | one reporting | . 0.5011 | |
| (City |) | (State) | (Zip) | Tal | ole I - Non | -Deri | ivative S | ecuritie | s Acqui | ired, Dispo | osed of, or l | Beneficially | Owned | |
| 1.Title of S (Instr. 3) | ecurity | | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | (Instr. 8) | ction | 4. Secur (A) or E (Instr. 3 | Oisposed , 4 and : | of (D) | Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common | Stock | | 11/26/2018 | | Р | | 1 | A | \$ 38.51 | 49,287.5618 | | I | French Family Ranch Ltd. (1) | |
| Common | Stock | | | | | | | | | 19,024.8 | 393 | | D | |
| | | | | Derivative Securiti | es Acquire | the t | form dis | splays of, or Be | a curre | ently valid | OMB cor | espond uni ntrol numb | | 02) |
| 1. Title of | 2 | 3. Transactio | | | 5. Number | | | | | | Drigg of | 9. Number | of 10. | 11. Nature |
| Derivative Security | Conversion | | Year) Execution Da | ate, if Transaction Code Year) (Instr. 8) | | and | Expiration | on Date | Am Und Sec | derlying urities str. 3 and Derivative Security (Instr. 5) | 9. Number of e Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi Form of Derivativ Security: Direct (D or Indirect | of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code V | (A) (D) | Dat Exe | e ercisable | Expirati Date | Title | Amount or e Number of Shares | | | | |
| Repor | ting O | wners | | | | | | | | | | | | |
| | | | | Relationships | | 1 | | | | | | | | |
| Repor | rting Owner | Name / Add | lress | 100/ Orman | 1 | 1 | | | | | | | | |

Signatures

French Arthur L.

HOUSTON, TX 77056

| /s/ Jason B. Beauvais as Attorney-in-Fact for Arthur L. French | 11/28/2018 |
|--|------------|
| **Signature of Reporting Person | Date |

X

Explanation of Responses:

1300 POST OAK BLVD 8TH FLOOR

- * 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) French Family Ranch Ltd 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.