CANON JOSEPH E Form 4

Form 4 April 25, 2018

FORM 4

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

OMB Number: 3235-0287

burden hours per

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005
Estimated average

0.5

OMB APPROVAL

Section 16. Form 4 or Form 5 obligations may continue.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

response...

See Instruction 1(b).

(Print or Type Responses)

| 1. Name and Address of Reporting Person ** CANON JOSEPH E | | | 2. Issuer Name and Ticker or Trading Symbol | | | | | | 5. Relationship of Reporting Person(s) to Issuer | | | | |
|---|---|--|--|--------------|--------------------------------|----------|---|--|--|---|--|--|--|
| | Main Street Capital CORP [MAIN] | | | | | | (Check all applicable) | | | | | | |
| (Last) (First) (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | _X_ Director10% Owner | | | | |
| 1300 POST OAK BLVD., 8TH FLOOR | | | 04/16/2018 | | | | | | Officer (give title Delow) Other (specify below) | | | | |
| | (Street) | | | | 4. If Amendment, Date Original | | | | | 6. Individual or Joint/Group Filing(Check | | | |
| ************ | Filed(Month/Day/Year) | | | | | | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | |
| HOUSTO | | | | | | | Person | | | | | | |
| (City) | (Zip) | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | |
| 1.Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | | Code (Instr. 3, 4 and 5) | | | | | 5. Amount of Securities 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 | 04/16/2018 | | | J <u>(1)</u> | V | 181.4273 | A | \$ 37 | 67,551.2181 | D | | | |
| Common Stock | 04/16/2018 | | | <u>J(1)</u> | V | 110.971 | A | \$ 37.3 | 67,662.1891 | 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)

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transacti | 5. orNumber | 6. Date Exerc Expiration D | | 7. Title | | 8. Price of Derivative | 9. Nu Deriv |
|---------------------|------------------------|---|--------------------------------------|-------------------------------|-----------------|----------------|-------------------------------|--------------------|--------------------------------------|--|------------------------|---|
| Security (Instr. 3) | | or Exercise Price of Derivative Security | (inchail Day) Teal) | any (Month/Day/Year) | Code (Instr. 8) | of | (Month/Day/Year) eess | | Underlyi Securitie (Instr. 3 a | ying ies | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title N | Amount or Number of Shares | | |

Reporting Owners

Relationships Reporting Owner Name / Address

> 10% Owner Officer Other Director

CANON JOSEPH E 1300 POST OAK BLVD. 8TH FLOOR HOUSTON, TX 77056

X

Signatures

/s/ Jason B. Beauvais as Attorney-in-Fact for Joseph E. Canon

04/25/2018

**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).
- 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.

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.

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