## Edgar Filing: Smith Brent D. - Form 4

11 D

Smith Brent	t D.												
Form 4													
May 24, 20													
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB											PROVAL		
		SIAIES						IGE CO	UNINIISSION	OMB Number:	3235-0287		
Check this box					shington, D.C. 20549						January 31,		
if no longer subject to STATEMENT OF CHAN				NGES	IN	BENEFI	CIAI	OWN	ERSHIP OF	Expires: 2005			
-	Subject to Strate view of charts				SECURITIES					Estimated average			
Form 4		SECONTIES						burden hours per response 0.5					
Form 5	Filed pu	rsuant to S	Section	16(a) o	of th	e Securit	ies Ex	change	Act of 1934,	·			
obligations may continue. Section 17(a) of the Public Utility Holding Company Act of 1935 or Section													
See Inst		30(h)	of the I	nvestm	nent	Compan	y Act	of 1940	)				
1(b).													
(Print or Type	Responses)												
(I find of Type	responses)												
1. Name and Address of Reporting Person 2. Issuer N					Name <b>and</b> Ticker or Trading 5. Relations					of Reporting Person(s) to			
Smith Brent D. Symbol				Ŭ					Issuer				
				Street Capital CORP [MAIN]					(Check all applicable)				
(Last)	(First)	(Middle)	3. Date of	of Earlie	st Tr	ansaction			(Спеск	all applicable	)		
(Month/			(onth/Day/Year)					Director 10% Owner					
1300 POST OAK BLVD., 8TH 05/15			05/15/2	05/15/2018					XOfficer (give titleOther (specify below) below)				
FLOOR									CFO, Treasurer				
			mendment, Date Original					6. Individual or Joint/Group Filing(Check					
			Aonth/Day/Year)					Applicable Line)					
									_X_ Form filed by O Form filed by M				
HOUSTON	N, TX 77056								Person		porting		
(City)	(State)	(Zip)	Tab	de I - N	on-D	)erivative (	Securit	ies Acau	ired, Disposed of,	or Beneficial	v Owned		
1.Title of	2. Transaction Date	a 24 Deem		3.	011 2			-	5. Amount of	6.	7. Nature of		
Security	(Month/Day/Year)				actio	nor Dispose			Securities	0. Ownership	Indirect		
(Instr. 3)	-	any	Code (Instr. 3, 4 and 5)					Beneficially	Form: B	Beneficial			
		(Month/D	ay/Year)	(Instr.	8)				Owned Following	Direct (D) or Indirect	Ownership (Instr. 4)		
							( • >		Reported	(I)	(111301. 4)		
							(A) or		Transaction(s)	(Instr. 4)			
				Code	V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	05/15/2018			<b>J</b> (1)	V	25.8963	А	\$	49,209.2101	D			
Stock				-	,	10.0700		38.58	.,_,_,_,				

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.

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

## Edgar Filing: Smith Brent D. - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Smith Brent D. 1300 POST OAK BLVD. 8TH FLOOR HOUSTON, TX 77056			CFO, Treas	urer				
Signatures								
/s/ Jason B. Beauvais as Attorne Smith	05/24/2018							
**Signature of Report		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.

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.