FORM 3

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

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | |
|-------------------|-------|--|--|--|
| OMB | 3235- | | | |
| Number: | 0104 | | | |
| Estimated average | | | | |
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| response | 0.5 | | | |

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 Responses) | | | | | | | | | |
|--|--|------------------------------|-----------------|--|---|---------------------------|---|---|--|
| Name and Address of Reporting Person * Magdol David L. | Stateme (Month | /Day/Year | • | ~ | 3. Issuer Name and Ticker or Trading Symbol Main Street Capital CORP [MAIN] | | | | |
| (Last) (First) (Middl 1300 POST OAK BOULEVARD, SUITE 800 | 10/04/ | 10/04/2007 | | Person(s) to I (Check | 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner _X_ Officer (give Other (specify title below) below) Senior Vice President | | | 5. If Amendment, Date Original Filed(Month/Day/Year) | |
| (Street) HOUSTON, TX 77056 | | | | X Officer (g title below) | | | | | |
| (City) (State) (Zip) | (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | |
| 1.Title of Security (Instr. 4) | | Ben | | nt of Securities Illy Owned | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nat Owne (Instr. | rship | direct Beneficial | |
| Common Stock | | 208 | 8,372 | | D | | | | |
| | respond to espond unle | the colle | ectior orm d | n of information isplays a currer | contained in htly valid OM | this fo | itrol | | |
| 1. Title of Derivative Security (Instr. 4) | | Expiration Date th/Day/Year) | | tle and Amount of rities Underlying vative Security r. 4) | 4. Conversion or Exercise Price of | e For Der | Ownership Form of Derivative | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |
| | Date Exercisable | Expiration Date | Title | Amount or Numb of Shares | Derivative Security | Dir or I (I) | Security: Direct (D) or Indirect (I) (Instr. 5) | | |
| D 41 0 | | | | | | | | | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--------------------------------|---------------|-----------|------------------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| Magdol David L. | | | | | | |
| 1300 POST OAK BOULEVARD | | | Senior Vice President | | | |
| SUITE 800 | | | Sellioi vice President | | | |
| HOUSTON, TX 77056 | | | | | | |

Signatures

| /s/ David L. Magdol | 10/03/2007 |
|---------------------------------|------------|
| **Signature of Reporting Person | Date |

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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).

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.