## FORM 4

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

OMB APPROVAL OMB 3235-Number: 0287 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF Estimated average burden hours per response...

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

# **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or

(Print or Type Responses)  1. Name and Address of Reporting Person * CANON JOSEPH E			2. Issuer Name and Ticker or Trading Symbol Main Street Capital CORP [MAIN]					Iss	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director Officer (give title below)  Check all applicable)  Other (specify below)						
(Last) (First) (Middle) 1300 POST OAK BLVD., STE. 800			3. Date of Earliest Transaction (Month/Day/Year) 11/16/2009										elow)		
HOUSTON, TX	(Street) X 77056		4. If Amend Filed(Month/l		ate O	riginal		Ap	Individual or oplicable Line)  Form filed by C Form filed by N	One Repo	orting Perso	on			
(City)	(State) (Zij	0)	Table I -	Non-D	eriva	tive Secu	rities	Acquire	d, Disposed	of, or l	Beneficia	lly Owned	ı		
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	any	ion Date, if	Transaction (A Code (I		(A) or Di (D)	A) or Disposed of D) Instr. 3, 4 and 5)		f Securities Beneficially ( Following Re Transaction(s		6. Owners Form: Direct ( or Indir		lirect icial ership		
				Code	v	Amount	(A) or (D)		(Instr. 3 and 4		(I) (Instr. 4	Ì			
Common Stock	11/16/2009			<u>J<sup>(1)</sup></u>		132.872	A	\$ 13.74	14,738.047		D				
	Table II -		tive Securiti	•	re cu iired,	equired turrently Dispose	o res valid	pond ui OMB co or Benefi	in this form nless the for ontrol numb icially Owned	rm dis er.		,	9-02)		
1. Title of 2. Derivative Conver Security or Exer (Instr. 3) Price of Derivat Security	ve (Month/Day/Ye	3A. Deemed Execution Date	4. Tran Cod	4. 5. f Transaction Numbe Code of (Instr. 8) Derivat Securiti Acquire (A) or Dispose of (D) (Instr. 3 4, and 5		er ative ties red sed 3,	o. Date Expir	xercisable ration Date Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 an 4)	int of rlying ities	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Date Exercisab	Expiration Date	Title	or Number of				

Donouting Oromon Nones / Adduses	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
CANON JOSEPH E 1300 POST OAK BLVD. STE. 800 HOUSTON, TX 77056	X					

### **Signatures**

/s/ Rodger A. Stout as Attorney-in-Fact for Joseph E. Canon	12/21/2009
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 132.872 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.