FORM	4
------	---

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

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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 Type Responses)		-								
1. Name and Address of Reporting SHIVE DUNIA A	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) 1300 POST OAK BLVD 8T	(Middle) H FLOOR	3. Date of Earliest Transaction (Month/Day/Year) 05/03/2021					-	Officer (give title below)	Other (specify b	pelow)
(Street) HOUSTON, TX 77056-3077	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			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactio Code (Instr. 8)	on	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		· · ·	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership of Indi Form: Benefi Direct (D) Owner	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock	05/03/2021		A <u>(1)</u>		707	А	\$0	7,401.7311	D	
Common Stock	05/03/2021		A <u>(2)</u>		2,122.141	А	\$ 42.41	9,523.8721	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC 1474 (9-02) 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

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5	5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	on 1	Numb	er	and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	c	of		(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	I	Deriva	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				5	Securi	ities			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				A	Acqui	red			4)			Following	Direct (D)	
						(A) or							T T	or Indirect	
						Dispo							Transaction(s)	< / <	
						of (D)							(Instr. 4)	(Instr. 4)	
						Instr.									
					4	4, and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								LACICISADIC	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SHIVE DUNIA A 1300 POST OAK BLVD 8TH FLOOR HOUSTON, TX 77056-3077	Х						

Signatures

/s/ Jason B. Beauvais as Attorney-in-Fact for Dunia A. Shive	05/05/2021
**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) Shares issued under the Main Street Capital Corporation Non-Employee Director Restricted Stock Plan.
- (2) Shares issued under the Main Street Capital Corporation Deferred Compensation Plan.

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.