Edgar Filing: OFS Capital Corp - Form 4

OFS Capital Form 4 May 27, 201 FORN Check th if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	14 A 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 his box Washington, D.C. 20549 his box STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 16. SECURITIES or 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 20(h) of the Investment Company Act of 1935 or Section							OMB APPROVAL OMB 3235-0287 Number: January 31, 2005 Estimated average burden hours per response 0.5	
(Print or Type I	Responses)								
Pittson Glenn R. Sy			r Name and Tick apital Corp [O	ıg	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(M			f Earliest Transac Day/Year) 2014		X Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer				
			endment, Date Or nth/Day/Year)	riginal		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by Mara than One Banarting			
CHICAGO, IL 60606 — Form filed by More than One Reporting Person							porung		
(City)	(State) (Z	Tab Tab	le I - Non-Deriva	ative Securi	ties Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)			Transaction(A)	str. 3, 4 and 3 (A) or	f of (D) 5) Price	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	05/23/2014		P 2,7	700 A	\$ 12.58 (1)	44,966	D		
Common Stock						4,500	I	By daughter	
Common Stock						4,000	Ι	By daughter	

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)

Edgar Filing: OFS Capital Corp - Form 4

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)

1. Title of	2. Conversion	3. Transaction Date		4. Transactio	5.	6. Date Exerc		7. Title an		. Price of	9. Nu Doriv
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transactio Code (Instr. 8)	onNumber Expiration Date of (Month/Day/Year) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Amount of Underlyin Securities (Instr. 3 ar	ng S	Derivative Security Instr. 5)	Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	or Title Nur of	nount mber ares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Pittson Glenn R. C/O OFS CAPITAL CORPORATION 10 SOUTH WACKER DRIVE, SUITE 2: CHICAGO, IL 60606	500 X		Chief Executive Officer				
Signatures							
/s/ Robert S. Palmer, attorney in fact	05/27/2014						
**Signature of Reporting Person	Date						
Evaluation of Deenen							

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 price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$12.58 to \$12.60, inclusive, in respect of the purchases. The reporting person undertakes to provide to OFS Capital Corporation, any

(1) security holder of OFS Capital Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this footnote to this Form 4.

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.