

Main Street Capital Corporation
Dividend Reinvestment Plan
Restricted Share
Election to Opt out Form

Date _____

Mail to:
American Stock Transfer & Trust
Dividend Reinvestment Department
P.O. Box 922, Wall Street Station
New York, New York 10269-0560

Re: Main Street Capital Corporation Dividend Reinvestment Plan

I am a shareholder of record of Main Street Capital Corporation (“Main”) common stock which is made up of certificate number (s) _____ for _____ shares and _____ shares held in the Main Street Dividend Reinvestment Plan (the “Plan”) for a total of _____ shares. I hereby elect to opt out of the Plan for _____ shares of my Main shares.

I understand that this election must be received by American Stock Transfer and Trust at least three days prior to the payment date for a dividend. If the notice is received after that date, it will be effective for the next dividend date.

The shares are held as follows:

Name _____

Taxpayer Identification Number _____

Address _____

American Stock Transfer & Trust Account
Number _____

Signature

X _____

X _____

(If a joint account, all owners must sign)

Please note that this election can be reversed at any time by contacting American Stock Transfer and Trust.