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MVC CAPIT Form 4										
September 19		CTATES SI	FCUDITURS			NCEO	OMMISSION		PROVAL	
	Check this box							OMB Number:	3235-0287 January 31,	
if no long subject to Section 1 Form 4 or Form 5 obligation may conti <i>See</i> Instru 1(b).	6. Filed pur Section 17(suant to Sec a) of the Pul	SECU etion 16(a) of	J RITIES the Securit olding Con	ies E npany	xchange Act of	NERSHIP OF e Act of 1934, 1935 or Section 0	Expires: Estimated a burden hour response	2005 verage	
(Print or Type R	Responses)									
1. Name and A HELLERM	2. Issuer Name a ymbol	nd Ticker or	Tradir	ıg	5. Relationship of Reporting Person(s) to Issuer					
			IVC CAPITA	, r	/VC]		(Check all applicable)			
	(First) (1 CAPITAL, INC., AVE., 2ND FLC	(N 287 09	Date of Earliest Aonth/Day/Year) 9/18/2014				X Director Officer (give below)	title 10% below)	Owner er (specify	
	(Street)		If Amendment, led(Month/Day/Y	-	1		6. Individual or Jo Applicable Line) _X_ Form filed by 0			
PURCHASE	E, NY 10577						Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Table I - Nor	n-Derivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		ate, if Transac Code /Year) (Instr. 8	4. Securi ction(A) or D (Instr. 3, 3) V Amount	isposed	d of (D)	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, \$.01 par value	09/18/2014		Р	1,250	A	\$ 11.55	61,250	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 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

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	e	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / A	Address	ress Relationships							
http://mg o white / tame / t		Director	10% Owner	Officer	Other				
HELLERMAN GERALD C/O MVC CAPITAL, INC 287 BOWMAN AVE., 2NI PURCHASE, NY 10577		X							
Signatures									
/s/ Gerald Hellerman	09/19/201	4							
<u>**</u> 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).

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.