Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Sarner Michael Scott						2. Issuer Name and Ticker or Trading Symbol  CAPITAL SOUTHWEST CORP [ CSWC ]								(Che	ck all app Direc	licable)	g Person(s) to 10% (		
(Last) (First) (Middle) C/O CAPITAL SOUTHWEST CORPORATION 8333 DOUGLAS AVE, SUITE 1100					06/1	3. Date of Earliest Transaction (Month/Day/Year) 06/10/2022								X	belov (	v) ``Chief Fina	b ncial Offi	below)	
(Street) DALLAS TX 75225					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(Sta		Zip)	D	45		-141			D:-				<b>6</b> 1 - 1 - 1		1			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day						Execution Date,		Date,	3. Transaction Code (Instr. 8)  4. Securitie Disposed Code (Society Code (Code		es Acquired (A) o Of (D) (Instr. 3, 4		A) or i, 4 and	5. Amo Securit Benefic Owned Report	ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	Amount	(A) or (D) Pr		Price	Transa	ction(s) 3 and 4)			(				
Common Stock 06/10/2						022			<b>A</b> <sup>(1)</sup>		43,990	A		\$ <mark>0</mark>	321,	321,307.704			
Common Stock 06/10/2					2022				F <sup>(2)</sup>		7,945	D	!	\$21.62	2 313,362.704		D		
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	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)	4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disp of (D	osed 0) tr. 3, 4	Expiration		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		D S (I	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owner Form Director Ind (I) (In	t (D) lirect	Beneficial Ownership (Instr. 4)
					Code \		(A)	(D)	Date Exercisable		Expiration Date	Amoun or Number of Shares		ber					

## **Explanation of Responses:**

- 1. Shares issued under the Capital Southwest Corporation 2021 Employee Restricted Stock Award Plan.
- 2. Shares withheld for payment of tax liability upon vesting of restricted shares granted under the Capital Southwest Corporation 2010 Restricted Stock Award Plan. This withholding transaction was approved by the Compensation Committee of Capital Southwest's Board of Directors in accordance with Rule 16b-3(d)(1) of the Securities Exchange Act of 1934 (the "Act"), and as such, the sale is exempt from section 16(b) of the Act pursuant to Rule 16b-3(e) promulgated thereunder.

## Remarks:

/s/ Michael Scott Sarner

06/10/2022

\*\* Signature of Reporting Person Date

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

- \* 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.

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 Number.