FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB AF	PR	U١	/AL
	OMB Number:		3	3235-028
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37 Estimated average burden hours per response: 0.5

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

# STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person*     DIEHL BOWEN S					2. Issuer Name <b>and</b> Ticker or Trading Symbol  CAPITAL SOUTHWEST CORP [ CSWC ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owne								
<del></del>															Λ						
(Last) (First) (Middle)					3. D	Date of Earliest Transaction (Month/Day/Year)								$\exists$	X	Officer (give title below)			Other ( below)	(specify	
C/O CAPITAL SOUTHWEST CORPORATION					12/	12/11/2015									President and CEO						
5400 LYNDON B. JOHNSON FWY, SUITE 1300																					
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
DALLAS TX 75240														X Form filed by One Reporting Person							
-															Form filed by More than One Reporting Person						
(City)	(St	ate) (2	Zip)																		
		Tabl	e I - Nor	n-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, oı	r Bene	eficia	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)						Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				4 and Secur Benef		cially I 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)	Price	•	Transaction(s) (Instr. 3 and 4)				(111501.4)	
Common Stock 12/1:				1/2015				A		587(1)		A	\$0		104,587		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)	Derivative   Conversion   Date   Execution   Security   or Exercise   (Month/Day/Year)   if any			Date,	Code (Instr.		n of l		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Nun of	ount nber res							

#### **Explanation of Responses:**

1. Represents a transfer of 587 shares of unvested CSWC shares from our previous ESOP plan to Capital Southwest Management Corporation Employee Savings 401K Plan.

### Remarks:

/s/ Bowen S. Diehl 12/14/2015

\*\* 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.