## FORM 4

obligations may continue. See Instruction 1(b).

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

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
Scenori 10. Form 4 of Form 5	

OMB APPROVAL OMB Number: 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*  HODGSON SUSAN K						2. Issuer Name and Ticker or Trading Symbol CAPITAL SOUTHWEST CORP [ CSWC ]									Check	ionship of Reportin all applicable) Director Officer (give title		g Person(s) to Issuer  10% Owner Other (specify	
(Last) (First) (Middle) 12900 PRESTON RD STE 700					3. Date of Earliest Transaction (Month/Day/Year) 11/01/2006									X	belov				
(Street)  DALLAS TX 75230  (City) (State) (Zip)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person					
		Tabl	e I - Noi	n-Deriv	ative	Sec	curitie	s Acq	uired,	Dis	posed o	f, o	r Ben	efici	ally	Owne	ed		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date			3. Transa Code ( 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)				4 and Secu Bene		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		Transa	action(s) 3 and 4)		(11301. 4)
Common Stock 11/01/2					/2006				A		84		A	\$95	.62	1,001		I	ESOP
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)	3A. Deem Execution if any (Month/Da	Date, Transact Code (In					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount		vative urity r. 5)	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)		Date Exercisa		Expiration Date	Title	of e Sha	ares					

**Explanation of Responses:** 

/s/ Susan K. Hodgson

11/01/2006

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).