FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL							
OMB Number: 3235-0104							
Estimated average burden							
hours per response:	0.5						

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

			01 00011	011 00(11) 01	110 1110	estinent Company Act of 19					
1. Name and Address of Reporting Person* Brooks David R 2. Date of Event Requiring Statement (Month/Day/Year) 01/20/2014		nent	3. Issuer Name and Ticker or Trading Symbol <u>CAPITAL SOUTHWEST CORP</u> [CSWC]								
	(First) L SOUTHWES	(Middle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			(Mc	5. If Amendment, Date of Original Filed (Month/Day/Year)		
CORPORATION 12900 PRESTON ROAD, SUITE 700					Officer (give title below)	Other (spe below)	Apr	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person			
(Street) DALLAS	TX	75230							Form filed by Reporting P	y More than One erson	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					unt of Securities ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common Stoc	k					0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4) 2. Date Exercisable a Expiration Date (Month/Day/Year)		ate	3. Title and Amount of Secur Underlying Derivative Secur			4. Conversion or Exercise Price of	rcise Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)			
			Date Exercisable	Expiratio Date	n Title	Đ	Amount or Number of Shares	Derivative Security	or Indirect (I) (Instr. 5)		

Explanation of Responses:

/s/ David R. Brooks

01/28/2014

** 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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).