## 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

Filed purcuant to Section 16(a) of the Securities Evolution Act of 1024

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

9. Number of

derivative

Securities

Beneficially

Security

(Instr. 5)

10.

Ownership

Direct (D)

Form:

11. Nature

of Indirect

Beneficial

Ownership

	Person Reporting  7. Nature of Indirect
(Last) (First) (Middle)  12900 PRESTON RD  STE 700  (Street) DALLAS TX 75230  (City) (State) (Zip)  3. Date of Earliest Transaction (Month/Day/Year) 07/21/2008  3. Date of Earliest Transaction (Month/Day/Year) 07/21/2008  4. If Amendment, Date of Original Filed (Month/Day/Year)  City) (State) (Zip)  A below) b Senior Vice Preside  Senior Vice Preside  A below) b Senior Vice Preside  Senior Vice Preside  A below) b Senior Vice Preside  Senior Vice Preside  A below) b Senior Vice Preside	Person
(Last) (First) (Middle)  12900 PRESTON RD  STE 700  4. If Amendment, Date of Original Filed (Month/Day/Year)  DALLAS TX 75230  Form filed by One Reporting Form filed by More than One Person	Person
(Last) (First) (Middle)  12900 PRESTON RD  STE 700  (Street) DALLAS TX 75230  3. Date of Earliest Transaction (Month/Day/Year) 07/21/2008  3. Date of Earliest Transaction (Month/Day/Year) Senior Vice Preside  4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Cheline) X Form filed by One Reporting Form filed by More than One	Person
(Last) (First) (Middle)  12900 PRESTON RD  STE 700  4. If Amendment, Date of Original Filed (Month/Day/Year)  (Street)  3. Date of Earliest Transaction (Month/Day/Year)  Senior Vice Preside  6. Individual or Joint/Group Filing (Che	
(Last) (First) (Middle)  12900 PRESTON RD  STE 700  3. Date of Earliest Transaction (Month/Day/Year)  07/21/2008  Senior Vice Preside	k Applicable
(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) below) below) below) Senior Vice Preside	
(Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year)	t
	ner (specify ow)
1. Name and Address of Reporting Person*  ASHBAUGH WILLIAM M  2. Issuer Name and Ticker or Trading Symbol  CAPITAL SOUTHWEST CORP [ CSWC ]  5. Relationship of Reporting Person(s) (Check all applicable) Director 1	% Owner

## (e.g., puts, calls, warrants, options, convertible securities) 3A. Deemed Execution Date 8. Price of Derivative 5. Number 6. Date Exercisable and 7. Title and

**Expiration Date** 

(Month/Day/Year)

Amount of

Securities Underlying

(iiisti. 3)	Derivative Security		(MOHUIDAY/TEAI)	0)		Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)				Derivative Security (Instr. 3 and 4)		(ilisu. 5)	Owned Following Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	(Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non- qualified Stock Option <sup>(1)</sup>	\$118.7	07/21/2008		A		5,000		07/21/2009	07/21/2018	Common Stock	(1)	\$118.7	5,000	D	

## **Explanation of Responses:**

1. Title of Derivative

Security (Instr. 3)

2. Conversion

or Exercise Price of

1. Exercisable in five (5) annual cumulative installments of 1,000 shares beginning 2009.

3. Transaction Date

(Month/Day/Year)

if any

(Month/Day/Year)

/s/ William M. Ashbaugh 07/25/2008

\*\* Signature of Reporting Person

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).

Transaction Code (Instr. 8)

Derivative

Securities

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.