FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | | | |
|--------------------------|-----|--|--|--|--|--|--|
| OMB Number: 3235- | | | | | | | |
| 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

| Name and Address of Reporting Person* Morris Tracy L. | | | 2. Date of Event Requiring Stater Month/Day/Yea 07/21/2008 | ring Statement h/Day/Year) CAPITAL SOUTHWEST CORP [CSWC] | | | | | | | |
|---|---------|--|---|--|---|----------------------------|---|--|---|--|--|
| (Last) | (First) | (Middle) | | | Relationship of Reporting Perso (Check all applicable) Director | | on(s) to Issuer | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | |
| 12900 PRESTON ROAD, SUITE 700 | | | | | X | Officer (give title below) | Other (spe below) | Ap | 6. Individual or Joint/Group Filing (Check Applicable Line) | | |
| (Street) DALLAS | TX | 75230 | | | | Chief Financial C | otticer | | | y One Reporting Person y More than One erson | |
| (City) | (State) | (Zip) | | | | | | | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | Beneficially Owned (Instr. 4) | | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) | | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security (Instr | | | 4. Conversio or Exercis Price of | 5. Ownership Form: Direct (D) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| | | | Date Exercisable | Expiratio Date | n Title | | Amount or Number of Shares | Derivative Security | or Indirect (I) (Instr. 5) | | |
| Incentive Stock Option ⁽¹⁾ | | 07/21/2009 | 07/21/201 | 8 | Common Stock | 5,000 | 118.7 | D | | | |

Explanation of Responses:

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

<u>/s/ Tracy L. Morris</u> <u>07/28/2008</u>

** 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 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).

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.