

OFS CAPITAL CORP

Reported by
PORTER MUKYA

FORM 3

(Initial Statement of Beneficial Ownership)

Filed 05/05/17 for the Period Ending 05/02/17

Address	10 SOUTH WACKER DRIVE SUITE 2500 CHICAGO, IL 60606
Telephone	847-734-2060
CIK	0001487918
Symbol	OFS
Industry	Closed End Funds
Sector	Financials
Fiscal Year	12/31

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 * Porter Mukya (Last) (First) (Middle)	2. Date of Event Requiring Statement (MM/DD/YYYY) 5/2/2017	3. Issuer Name and Ticker or Trading Symbol OFS Capital Corp [OFS]
C/O OFS CAPITAL CORPORATION, 10 S. WACKER DRIVE, SUITE 2500 (Street)	4. Relationship of Reporting Person(s) to Issuer (Check all applicable) ___ Director ___ 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Chief Compliance Officer /	5. If Amendment, Date Original Filed (MM/DD/YYYY)
CHICAGO, IL 60606 (City) (State) (Zip)	6. Individual or Joint/Group Filing (Check Applicable Line) _X_ Form filed by One Reporting Person ___ Form filed by More than One Reporting Person	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	0	D	

Table II - Derivative Securities Beneficially Owned (e.g. , puts, calls, warrants, options, convertible securities)

1. Title of Derivate Security (Instr. 4)	2. Date Exercisable and Expiration Date (MM/DD/YYYY)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares			

Explanation of Responses:

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Porter Mukya C/O OFS CAPITAL CORPORATION 10 S. WACKER DRIVE, SUITE 2500 CHICAGO, IL 60606			Chief Compliance Officer	

Signatures

/s/ **Mukya S. Porter**

5/5/2017

**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 control number.