## FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*  Alala Joseph B III					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Capitala Finance Corp.</u> [ CPTA ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
	<u>жери Б т</u>	<u></u>			_										X Direct		itlo		6 Owner		
	ITALA FII	(First) (Middle) TALA FINANCE CORP. GRESS STREET, SUITE 360					3. Date of Earliest Transaction (Month/Day/Year) 09/23/2014									X Officer (give title Other (specify below)  See Remarks					
(Street) CHARLOTTE NC 28209				4.	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							
(City)	(St	ate) (	Zip)												Pers	son					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
[0			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		e,   T	3. Transaction Code (Instr. 8)					Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								ď	Code	v	Amount	(A) or (D)	Price		Transactio (Instr. 3 ar				,		
Common	Stock			09/23/20	14				J <sup>(1)</sup>		15,000	A	\$20 <sup>(2</sup>	2)	111,8	322	:	I	via Capitala Private Investments LLC		
Common	Stock			09/23/20	14				J <sup>(3)</sup>		40,500	D	\$20 <sup>(2</sup>	2)	311,3	365	:	ı	via Capitala Restricted Shares I LLC		
Common	Stock			09/23/20	14				J <sup>(3)</sup>		14,700	D	\$18.41	1 <sup>(4)</sup>	296,6	665		I	via Capitala Restricted Shares I LLC		
Common	Stock														320,9	916	I	)			
Common	Stock														2,70	05		I	via Capitala Transaction Corp.		
Common Stock														972			I	via CapitalSouth Corporation			
Common Stock														100		I Ir A		via Capitala Investment Advisors, LLC			
		Та	ble II								sposed of, , convertil				Owned						
Derivative Conversion Date Security Or Exercise (Month/Day/Year) if a		Execu if any			saction de (Instr. Securitic Acquire: (A) or Dispose of (D) (Instr. 3, and 5)		ative ities ired sed	Expi	ration	ercisable and Date y/Year)	Amou Secur Under Deriva Secur	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Gecurity Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership ct (Instr. 4)			
					Code	v	(A)	(D)	Date Exer	cisabl	Expiration e Date	Title	Amount or Number of Shares	r							

## **Explanation of Responses:**

- 1. The shares were transferred from Capitala Restricted Shares I, LLC to Capitala Private Investments, LLC on September 23, 2014.
- $2. \ The price reported is the initial public offering price per share of Capitala Finance Corp.'s common stock, which was completed on September 30, 2013.$
- 3. The shares were transferred to certain employees of Capitala Investment Advisors, LLC on September 23, 2014.
- 4. The price reported is the closing price on September 23, 2014.

/s/ Richard G. Wheelahan, III, 09/30/2014 attorney-in-fact

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

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.