THL Credit, Inc. Form 4 March 16, 2015

## FORM 4

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** 

**OMB APPROVAL** 

Number:

3235-0287

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January 31, 2005

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if no longer subject to Section 16. Form 4 or Form 5 obligations may continue.

Check this box

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

See Instruction

| 1. Name and Address of Reporting Person * HUGHES KEITH W |                                         |       | 2. Issuer Name <b>and</b> Ticker or Trading Symbol                                                              | 5. Relationship of Reporting Person(s) to Issuer                                                                                                                                |  |  |  |  |
|----------------------------------------------------------|-----------------------------------------|-------|-----------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| (Last) (First) (Middle)                                  |                                         |       | THL Credit, Inc. [TCRD]                                                                                         | (Check all applicable)                                                                                                                                                          |  |  |  |  |
|                                                          |                                         |       | 3. Date of Earliest Transaction                                                                                 |                                                                                                                                                                                 |  |  |  |  |
|                                                          |                                         |       | (Month/Day/Year)                                                                                                | _X_ Director 10% Owner                                                                                                                                                          |  |  |  |  |
| FLOOR                                                    | RAL STREET 31                           | IST   | 03/13/2015                                                                                                      | Officer (give title Other (specify below)                                                                                                                                       |  |  |  |  |
| (Street)                                                 |                                         |       | 4. If Amendment, Date Original                                                                                  | 6. Individual or Joint/Group Filing(Check                                                                                                                                       |  |  |  |  |
| BOSTON,                                                  | MA 02110                                |       | Filed(Month/Day/Year)                                                                                           | Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person                                                                            |  |  |  |  |
| (City)                                                   | (State)                                 | (Zip) | Table I - Non-Derivative Securities A                                                                           | cquired, Disposed of, or Beneficially Owned                                                                                                                                     |  |  |  |  |
| 1.Title of<br>Security<br>(Instr. 3)                     | 2. Transaction Date<br>(Month/Day/Year) |       | Date, if Transaction Disposed of (D) Code (Instr. 3, 4 and 5)  ay/Year) (Instr. 8)  (A) or Code V Amount (D) Pr | Securities Ownership Indirect Beneficially Form: Beneficial Owned Direct (D) Ownership Following or Indirect (Instr. 4) Reported (I) Transaction(s) (Instr. 4) (Instr. 3 and 4) |  |  |  |  |
| Common<br>Stock                                          | 03/13/2015                              |       | P 10,380 A \$ 12.4                                                                                              | 007 49,880 D                                                                                                                                                                    |  |  |  |  |

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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

#### Edgar Filing: THL Credit, Inc. - Form 4

|                                      | 2.                                                              | 3. Transaction Date |                                         | 4.                             | 5.                                                                                                               | 6. Date Exerc       |                    | 7. Titl                            |                                        | 8. Price of                          | 9. Nu                                                             |
|--------------------------------------|-----------------------------------------------------------------|---------------------|-----------------------------------------|--------------------------------|------------------------------------------------------------------------------------------------------------------|---------------------|--------------------|------------------------------------|----------------------------------------|--------------------------------------|-------------------------------------------------------------------|
| Derivative<br>Security<br>(Instr. 3) | Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | (Month/Day/Year)    | Execution Date, if any (Month/Day/Year) | Transact<br>Code<br>(Instr. 8) | orNumber<br>of<br>Derivativ<br>Securities<br>Acquired<br>(A) or<br>Disposed<br>of (D)<br>(Instr. 3,<br>4, and 5) | <b>:</b>            |                    | Amou<br>Under<br>Securi<br>(Instr. | lying                                  | Derivative<br>Security<br>(Instr. 5) | Deriv<br>Secur<br>Bene<br>Own<br>Follo<br>Repo<br>Trans<br>(Instr |
|                                      |                                                                 |                     |                                         | Code V                         | (A) (D)                                                                                                          | Date<br>Exercisable | Expiration<br>Date | Title                              | Amount<br>or<br>Number<br>of<br>Shares |                                      |                                                                   |

# **Reporting Owners**

Reporting Owner Name / Address

Director 10% Owner Officer Other

HUGHES KEITH W 100 FEDERAL STREET 31ST FLOOR X BOSTON, MA 02110

## **Signatures**

Stephanie Pare Sullivan as Attorney-in-Fact 03/16/2015

\*\*Signature of Reporting Person Date

# **Explanation of Responses:**

- \* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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