obligations may Instruction 1(b).

## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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Check this box if no longer subject to	STATEMENT OF CHANGES IN BENEFICIAL	<b>OWNERSHIP</b>
Section 16. Form 4 or Form 5		
obligations may continue. See		

OMB APPROVAL OMB Number: 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*  LADD ROBERT			2. Issuer Name <b>and</b> Ticker or Trading Symbol Stellus Capital Investment Corp [ SCM ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)										
LADD KOBEKI					1-1-1-1									X	Direc	ctor		10% C	wner			
(Last) (First) (Middle)				3. D	Date of Earliest Transaction (Month/Day/Year)									X	Officer (give title below)			Other (specify below)				
C/O STELLUS CAPITAL INVESTMENT CORP				08/24/2015									President and CEO									
4400 POST OAK PARKWAY, SUITE 2200																						
(Street)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
HOUSTON TX 77027														X Form filed by One Reporting Person								
														Form filed by More than One Reporting Person					orting			
(City)	(St	ate) (	Zip)																			
		Tabl	e I - Nor	า-Deriva	ative	Sec	curitie	s Acq	juired,	Dis	posed o	f, o	r Ben	efici	ally (	Owne	ed					
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution Da		Date,	Code (Instr.						4 and Se Be Ov		Securities Beneficially		ership Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
								Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(1130.4)			
Common	Stock			08/24/	/2015				P		7,000	)	A	\$9.9	9.91 <sup>(1)</sup> 135,072 <sup>(2)</sup>		Г	)				
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																					
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any C			ransaction of Code (Instr. Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price Deriva Securi (Instr. !		9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	Owi Fori Dire or II (I) (I	nership n: oct (D) ndirect nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)						
					Code	v	(A)		Date Exercisa		Expiration Date	Title	or Nui of	ount mber								

## **Explanation of Responses:**

1. The price shown in Column 4 is the weighted average purchase price, rounded to the nearest hundredth, of the shares of common stock of Stellus Capital Investment Corporation (the "Issuer"), par value \$0.001 per share, on the transaction date. The price range for the purchases is \$9.83 to \$10.35 per share. The Reporting Person undertakes to provide upon request by the staff of the Securities and Exchange Commission, the Issuer or a security holder of the Issuer full information regarding the number of shares purchased at each separate price.

2. The amount of securities beneficially owned following the reported transactions also includes an additional 811 shares issued under the DRIP.

/s/ W. Todd Huskinson, 08/26/2015 attorney-in-fact

\*\* 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 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.