

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
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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* <u>OI3, LLC</u> <hr/> (Last) (First) (Middle) 4700 WILSHIRE BOULEVARD <hr/> (Street) LOS ANGELES CA 90010 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 01/01/2020	3. Issuer Name and Ticker or Trading Symbol <u>OFS Capital Corp [ OFS ]</u>	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> 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	2,946,474	I	(1)

**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)		4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: 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			

1. Name and Address of Reporting Person* <u>OI3, LLC</u> <hr/> (Last) (First) (Middle) 4700 WILSHIRE BOULEVARD <hr/> (Street) LOS ANGELES CA 90010 <hr/> (City) (State) (Zip)		
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1. Name and Address of Reporting Person* <u>RESSLER RICHARD S</u> <hr/> (Last) (First) (Middle) 4700 WILSHIRE BOULEVARD <hr/> (Street) LOS ANGELES CA 90010 <hr/> (City) (State) (Zip)		
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1. Name and Address of Reporting Person* <u>OI3 2019 Trust</u> <hr/> (Last) (First) (Middle) 4700 WILSHIRE BOULEVARD <hr/> (Street) LOS ANGELES CA 90010 <hr/> (City) (State) (Zip)		
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**Explanation of Responses:**

**Remarks:**

1. The reported securities are owned directly by Orchard First Source Asset Management ("OFSAM") and may be deemed to be indirectly owned by OI3, LLC through its interests in OFSAM, indirectly owned by The OI3 2019 Trust, as the sole owner of the limited liability company interests in OI3, LLC, and indirectly owned by Richard S. Ressler, as investment trustee of The OI3 2019 Trust. Each of the foregoing persons disclaims beneficial ownership of the reported securities except to the extent of his/its pecuniary interest therein.

/s/ Richard S. Ressler,  
President of the Manager of      01/13/2020  
OI3, LLC

\*\* 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.**