

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

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

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## STATEMENT OF CHANGES IN 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 * |                        |             |                   |                           | 2. 1  |                            |  |                           |       |           |   |  |   | 5. Relationship of Reporting Person(s) to Issuer |                            |                         |                           |
|---|------------------------|-------------|-------------------|---------------------------|---|----------------------------|--|---------------------------|-------|-----------|---|--|---|--|----------------------------|-------------------------|---------------------------|
|   |                        |             |                   |                           |   |                            |  |                           |       |           |   |  | (Check all ap   | (Check all applicable)                           |                            |                         |                           |
| ROLL PENELOPE F                           |                        |             |                   |                           | Al  | ARES CAPITAL CORP [ ARCC ] |  |                           |       |           |   |  |   |  |                            |                         |                           |
| (Last) (First) (Middle)                   |                        |             |                   | 3. I                      | 3. Date of Earliest Transaction (MM/DD/YYYY)  |                            |  |                           |       |           |   | Director   |   |  |                            |                         |                           |
| (Lust) (First) (Windle)                   |                        |             |                   |                           | , in the second of the second |                            |  |                           |       |           |   |  | X_ Officer (give title below) Other (specify below)         |  |                            |                         |                           |
| C/O ARES CAPITAL                          |                        |             |                   |                           | 12/14/2021  |                            |  |                           |       |           |   |  | ial Office  | r  |                            |                         |                           |
| CORPORAT                                  |                        |             | AVF               | ENUI                      | ₹.  |                            |  |                           |       |           |   |  |   |  |                            |                         |                           |
| 44TH FLOO                                 |                        |             |                   |                           | -,  |                            |  |                           |       |           |   |  |   |  |                            |                         |                           |
|   |                        |             |                   | 4. 1                      | 4. If Amendment, Date Original Filed (MM/DD/YYYY)   |                            |  |                           |       |           |   | Y) 6. Individual                                   | 6. Individual or Joint/Group Filing (Check Applicable Line) |  |                            |                         |                           |
|   |                        |             |                   |                           |   |                            |  | .,                        | υ     |           |   |  | ,   |  | - T                        |                         | ,                         |
| NEW YORK, NY 10167                        |                        |             |                   |                           |   |                            |  |                           |       |           |   |  | X_Form filed by One Reporting Person                        |  |                            |                         |                           |
| (City) (State) (Zip)                      |                        |             |                   |                           |   |                            |  |                           |       |           | Form filed by                                 | Form filed by More than One Reporting Person       |   |  |                            |                         |                           |
|   |                        |             |                   |                           |   |                            |  |                           |       |           |   |  |   |  |                            |                         |                           |
|   |                        |             | Table             | I - No                    | on-Der  | ivati                      | ve Seci                                | ırities Ac                | quir  | ed, Di    | sposed o                                      | f, or l  | Beneficially Own  | ed   |                            |                         |                           |
| 1. Title of Security 2. Trans. D          |                        |             | 2A. D             |                           |   | de                         |  |                           |       |           | 5. Amount of Securities Beneficially Owned 6. |  |   | 7. Nature  |                            |                         |                           |
| (Instr. 3)                                |                        |             |                   | Execution<br>Date, if any |   | (Instr. 8)                 |  |                           |       |           | (Instr. 3 and 4)                              | Following Reported Transaction(s) (Instr. 3 and 4) |   |  | of Indirect<br>Beneficial  |                         |                           |
|   |                        |             |                   |                           |   |                            |  |                           |       |           |   |  |   | Ownership (Instr. 4)                             |                            |                         |                           |
|   |                        |             |                   |                           |   |                            |  |                           |       |           | (A) or  |  |   |  |                            | (I) (Instr.             | (msu. 1)                  |
|   |                        |             |                   |                           |   |                            |  | Code                      | V     | Amoun     | (D)   | Price  | :   |  |                            | 4)                      | _                         |
| Common Stock 12/14/20                     |                        |             | /2021             |                           |   | s                          |  | 25805                     | D     | \$19.96   | (1)   | 27000  |   | I  | By<br>trust (2)            |                         |                           |
| Common Stock                              |                        |             |                   |                           |   |                            |  |                           |       |           |   | 11147  |   | D  |                            |                         |                           |
|   |                        |             |                   |                           |   |                            |  |                           |       |           |   |  |   |  |                            |                         |                           |
|   | Tab                    | le II - Dei | rivativ           | e Secu                    | ırities   | Bene                       | ficially                               | Owned (                   | e.g., | puts,     | calls, wa                                     | rrant  | s, options, conve   | rtible secu                                      | ırities)                   |                         |                           |
| 1. Title of Derivate                      | 2.                     | 3. Trans.   | 3A. De            |                           | 4. Trans.   | Code                       | 5. Numb                                |                           |       | Date Exe  |   |  | e and Amount of   |  | 9. Number of               | 10.                     | 11. Nature                |
| Security<br>(Instr. 3)                    | Conversion or Exercise | Date        | Execut<br>Date, i |                           | (Instr. 8)  |                            |  | ve Securities<br>d (A) or | and   |           |   |  | ities Underlying<br>ative Security                          |  | derivative<br>Securities   | Ownership<br>Form of    | of Indirect<br>Beneficial |
|   | Price of<br>Derivative |             |                   | ,                         |   |                            | Disposed of (D)<br>(Instr. 3, 4 and 5) |                           |       |           |   | (Instr.  | 3 and 4)  |  | Beneficially<br>Owned      | Derivative<br>Security: | Ownership<br>(Instr. 4)   |
|   | Security               |             |                   |                           |   | (IIISTI. 3                 |  | 4 and 3)                  |       |           |   |  |   |  | Following                  | Direct (D)              | (Insu. 4)                 |
|   |                        |             |                   |                           |   |                            | 1                                      |                           | Dat   | te        | Expiration                                    | Title A  | Amount or Number of   |  | Reported<br>Transaction(s) | or Indirect             |                           |
|   |                        |             |                   |                           | Code  | V                          | (A)                                    | (D)                       |       | ercisable |   | Title  | Shares  |  | (Instr. 4)                 | (1) (IIISII.<br>4)      |                           |
|   | _                      | •           |                   |                           |   |                            |  | •                         |       |           |   |  |   | •  |                            |                         |                           |

#### **Explanation of Responses:**

- (1) The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$19.95 to \$19.975, inclusive. The reporting person undertakes to provide to Ares Capital Corporation, any security holder of Ares Capital Corporation, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in footnote (1) to this Form 4.
- (2) These shares are held in a revocable trust for the benefit of the reporting person, the reporting person's spouse and the reporting person's children.

### **Reporting Owners**

| Reporting Owner Name / Address | Relationships |           |                            |       |  |  |  |  |
|--------------------------------|---------------|-----------|----------------------------|-------|--|--|--|--|
| Reporting Owner Name / Address | Director      | 10% Owner | Officer                    | Other |  |  |  |  |
| ROLL PENELOPE F                |               |           |                            |       |  |  |  |  |
| C/O ARES CAPITAL CORPORATION   |               |           | Chief Financial Officer    |       |  |  |  |  |
| 245 PARK AVENUE, 44TH FLOOR    |               |           | Ciliei Filialiciai Officer |       |  |  |  |  |
| NEW YORK, NY 10167             |               |           |                            |       |  |  |  |  |

#### **Signatures**

/s/ Joshua Bloomstein, by power of attorney

Signature of Reporting Person

12/15/2021

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 control number. |
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