

[] 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

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

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.	2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
ROLL PENE	CLOPE F				A)	RES	CAP	PITAL C	OF	RP [A	RCC]						
(Last) (First) (Middle)				3. 1	3. Date of Earliest Transaction (MM/DD/YYYY)								X_ Officer (give title below) Other (specify below)				
C/O ARES C	CAPITAL							3/1	5/2	023			Chief Financi	al Office	r		
CORPORAT 44TH FLOO	,	5 PARK	AVE	ENUE	,												
	(Stree	et)			4.	If An	nendme	ent, Date C	rigi	nal File	d (MM/D	D/YYY	Y) 6. Individual o	or Joint/G	roup Filing	Check Appl	icable Line)
NEW YORK, NY 10167												X _ Form filed by One Reporting Person Form filed by More than One Reporting Person					
(C	ity) (Stat	e) (Zip	p)														
			Table	I - No	n-Dei	rivati	ve Sec	urities Ac	quir	ed, Dis	posed o	f, or E	Seneficially Owne	d			
1.Title of Security (Instr. 3)						Execution Date, if any (Instr. 8)		3. Trans. Co (Instr. 8)	or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			or Indirect (I) (Instr.	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 3/15			3/15/2	023	3		Code P	v	Amount 3000	(D) A	Price \$17.50	57500		4) I	By trust (1)		
Common Stock 3				3/16/2	3/16/2023			P		3000	A	\$17.44	2).	60500		I	By trust (1)
Common Stock												11147		D			
	Tabl	e II - Der	ivativ	e Secu	rities	Bene	eficially	Owned (e.g.,	, puts, o	alls, wa	rrant	s, options, conver	tible secu	ırities)		
Security Conversion Date Exe			Execut			Acqui Dispos		over of twe Securities d (A) or d of (D) , 4 and 5)		and Expiration Date			ies Underlying tive Security 3 and 4)	lying Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	V	(A)	(D)	Dat	te ercisable	Expiration Date	Title	Amount or Number of Shares		Transaction(s) (Instr. 4)		

Explanation of Responses:

- (1) 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.
- (2) The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$17.435 to \$17.440, 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 purchased at each separate price within the range set forth in footnote (2) to this Form 4.

Reporting Owners

Paparting 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			Chief Financial Officer					
NEW YORK, NY 10167								

Signatures

/s/ Joshua Bloomstein, by power of attorney

Signature of Reporting Person

→ Signature of Reporting Person

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.