FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	OVAL							
OMB Number:	3235-0287							
Estimated average burden								
hours per response:	0.5							

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

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 an	2. Issuer Name and Ticker or Trading Symbol Carlyle GMS Finance, Inc. [NONE]										Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner								
(Last) (First) (Middle) 520 MADISON AVENUE						3. Date of Earliest Transaction (Month/Day/Year) 08/07/2015											er (give title		(specify
38TH FLOOR (Street) NEW YORK NY 10022 (City) (State) (Zip)						Line) X Form filed by C										n filed by One n filed by Mor	roup Filing (Check Applicable One Reporting Person More than One Reporting		
		Tabl	e I - Nor	n-Deriva	ative	Sec	uritie	s Acc	quired,	Dis	posed o	f, o	r Ben	efici	ally	Owne	ed		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D) Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)						4 and See Be		ount of ities icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount				(A) or (D)	Price	•	Reported Transaction(s) (Instr. 3 and 4)			(1130.1.4)				
Common Stock 08/07/						/2015			P		197		A	\$19.37		5,960		D	
		Та									sed of, onvertib					vned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	1. Transaction Code (Instr. 3)				6. Date E Expiratio (Month/E	n Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)					9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nu of	nount mber ares					

Explanation of Responses:

Remarks:

/s/ Matthew C. Cottrell, attorney-in-fact

08/10/2015

** 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.