SEC Form 3

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 [*] Weinstein Adam	2. Date of Event Re Statement (Month/I 05/19/2011		3. Issuer Name and Ticker or Trading Symbol New Mountain Finance Corp [NMFC]					
(Last) (First) (Middle) C/O NEW MOUNTAIN CAPITAL, L.L.C. 787 7TH AVENUE, 48TH FLOOR (Street) NEW YORK NY 10019 (City) (State) (Zip)			4. Relationship of Reporting Person(s (Check all applicable) Director X Officer (give title below) Chief Financial C	10% Owner Other (spec below)	(Mo 6. I App	onth/Day/Year) ndividual or Joint/ blicable Line) X Form filed b	te of Original Filed Group Filing (Check y One Reporting Person y More than One Reporting	
Table I - Non-Derivative Securities Beneficially Owned								
······································			Amount of Securities eneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)								
Exp		cisable and ate Year)	3. Title and Amount of Securities Derivative Security (Instr. 4)	Underlying	4. Conversion or Exercise	se (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Indirect (I) (Instr. 5)		

Explanation of Responses:

Remarks:

No securities are beneficially owned.

/s/ Adam Weinstein

** Signature of Reporting Person

05/19/2011

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.