FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 32350104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF 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 A Held Davi	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 08/04/2021  3. Issuer Name and Ticker or Trading Symbol Portman Ridge Finance Corp [ PTMN ]										
(Last) (First) (Middle) C/O PORTMAN RIDGE FINANCE CORPORATION,						4. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				5. If Amendment, Date of Original Filed (Month/Day/Year)		
650 MADISON AVENUE, 23RD FLOOR			_	X Officer (give Other (speci title below) below)  Chief Compliance Officer					6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person			
(Street) NEW YORK	NY	10022									by More than One Person	
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					Amount of Securities     Beneficially 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)												
''''			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Sec Underlying Derivative Sec (Instr. 4)					5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
		Date Exercisable	Expiration Date	Title		Amount or Derivativ Security Number of Shares		/e	Direct (D) or Indirect (I) (Instr. 5)	5)		

**Explanation of Responses:** 

## Remarks:

No securities are beneficially owned.

<u>/s/ David Held</u> <u>08/04/2021</u>

\*\* Signature of Reporting

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.