

OLD MARKET CAPITAL CORP

Reported by **ZHU JEREMY QINLI**

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 10/08/25 for the Period Ending 10/06/25

Address 1601 DODGE ST.

SUITE 3350

OMAHA, NE, 68102

Telephone 727-726-0763

CIK 0001000045

Symbol OMCC

SIC Code 6153 - Short-Term Business Credit Institutions

Industry Consumer Lending

Sector Financials

Fiscal Year 03/31

FORM 4

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

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

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	ssuer	r Name	e and Tic	ker o	r Tradin	g Symbo		5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Zhu Jeremy	Qinli					LD I MC		KET C	CAP	ITAL	Corp [_X_ Director	,		10% Owner	
(Last)	(First	t) (Mi	iddle)		3. I	Date (of Earl	iest Trans	sactio	on (MM/I	DD/YYYY))	Officer (given	ve title below	·)	Other (spec	ify below)
1601 DODGI	E ST., SI	UITE 33	50					10	/6/2	2025							
	(Stre	eet)			4. I	f Am	endme	ent, Date	Orig	inal File	d (MM/DI	O/YYY	YY) 6. Individual	or Joint/G	roup Filii	ng (Check A	Applicable Line)
OMAHA, NE 68102													X _ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(C	ity) (Sta	ate) (Zi	p)												г	-8	
											•		Beneficially Owner			6.	1
1.Title of Security (Instr. 3) 2. Trans. I			s. Date 2A. Exe Date			3. Trans. Code (Instr. 8)		or Disposed of (D) Foll				mount of Securities Beneficially Owned owing Reported Transaction(s) tr. 3 and 4)			7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	V	Amount	(A) or (D)	Price				(I) (Instr. 4)	(msu. 1)
COMMON STOCK				10/6/20	25			A		5,932 (1)	A	\$0			29,554	D	
COMMON STOCK															600,704 (2)	I	SEE FOOTNOTE
	Tal	ole II - Dei	rivativ	e Secur	ities	Bene	ficially	y Owned	(e.g.	, puts, c	calls, wa	rrant	ts, options, conve	rtible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	curity Conversion Date Execution		tion (In	Trans.	Code	Acquire Dispose			6. Date Exercisable and Expiration Date			le and Amount of ities Underlying ative Security 3 and 4)	erlying Derivative d urity Security S (Instr. 5) B C		Owners Form o	tive Ownership (Instr. 4)	
					Code	V	(A)	(D)		ate cercisable	Expiration Date	Title	Amount or Number of Shares		Reported Transaction (Instr. 4)	(I) (Ins: 4)	

Explanation of Responses:

- (1) These shares were issued to the reporting person as part of his compensation for service as a director of the registrant.
- (2) Represents shares held by TCW Sepulveda Long/Short Equity Fund I, LP, and TCW Sepulveda Long/Short Equity Master Fund LTD (together, the "Funds"), which Funds are managed by Sepulveda Management LLC. Mr. Zhu is a principal of, and acts as a director of, Sepulveda Management LLC, and also holds certain limited partnership interests in the Funds. Mr. Zhu disclaims beneficial ownership of these shares to the extent of his pecuniary interest therein.

Reporting Owners

Reporting Owners								
Panarting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Zhu Jeremy Qinli								
1601 DODGE ST., SUITE 3350	X							
OMAHA, NE 68102								

Signatures

/s/ JEREMY QINLI ZHU

10/8/2025

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.