# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### 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

Name and Address of Reporting Person*  ADELGREN PAUL W		2. Issuer Name and Ticker or Trading Symbol GLADSTONE INVESTMENT CORPORATION\DE [GAIN]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director					
(Last) (First) (Middle) 1521 WESTBRANCH DRIVE, SUITE 200			3. Date of Earliest Transaction (Month/Day/Year) 03/14/2012									
(Street) MCLEAN, VA 22102		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)  Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	(Instr. 8)	(A) c			Beneficia Reported	ant of Securities ally Owned Following d Transaction(s)		6. Ownership Form:	Beneficial
			(Month/Day/Year)	Code	V Amo	Amount (D)		(Instr. 3 a	3 and 4)		\ /	Ownership (Instr. 4)
Common Stock	03.	/14/2012		P	875	A	\$ 7.96	3,714.72	21		D	
Reminder: Report on a so	eparate line for eac	ch class of secur	ities beneficially ow		Persons v	ho respo	rm are	not requ		spond unle	ss	474 (9-02)
Reminder: Report on a so	eparate line for eac	Table II - I	Derivative Securiti	es Acquire	Persons vecontained the form of the form o	/ho responding this for list of the list o	rm are currer reficiall	not requesting ntly valid	uired to res OMB cont		ss	474 (9-02)
1. Title of 2. Derivative Conversion	3. Transaction Date (Month/Day/Year	Table II - I (a) 3A. Deemed Execution Date any	Derivative Securiti e.g., puts, calls, wa 4. te, if Transaction Code (Instr. 8)	es Acquire	Persons vecontained the form of the form o	who responding this formula in this formula is plays a lof, or Bendertible seculor cisable tion Date	rm are currer neficiall rities) 7. Ti Amo Undo Secu	not requesting ntly valid	OMB conf	spond unle	of 10. Ownershi Form of Derivative Security: Direct (D or Indirec	11. Nat p of Indir Benefic Owners (Instr. 4

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
ADELGREN PAUL W 1521 WESTBRANCH DRIVE SUITE 200 MCLEAN, VA 22102	X					

## **Signatures**

Paula Novara, Attorney-in-fact	03/15/2012
**Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.