GLADSTONE INVESTMENT CORPORATION\DE Form 3 October 15, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB Number: 3235-01

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Ac Person <u>*</u> WILKINS	-	-	Statement (Month/Day/Year)	`	3. Issuer Name and Ticker or Trading Symbol GLADSTONE INVESTMENT CORPORATION\DE [GAIN]				
(Last)	(First)	(Middle)	10/07/2014		4. Relationship of Reporting Person(s) to Issuer				ndment, Date Original hth/Day/Year)
1521 WESTI DR., SUIT					(Check all applicable)				
(Street) MCLEAN, VA 22102					X_Director10% Owner OfficerOther (give title below) (specify below)		 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 		
(City)	(State)	(Zip)	Tal	ble I - N	on-Derivati	ve Securit	ies Be	neficially	y Owned
1.Title of Secur (Instr. 4)	ity		Ber	Amount of neficially (str. 4)	Dwned	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Na Owne (Instr	ership	irect Beneficial
Reminder: Repo owned directly o		te line for ea	ch class of securitie	es beneficia	ally SE	EC 1473 (7-02	2)		
	inform require	ation conta d to respo	oond to the colle lined in this form nd unless the for //B control numb	n are not rm displa	ys a				
T	able II - Deri	vative Secur	ities Beneficially C	Owned (e.g	g., puts, calls, v	warrants, op	tions, c	onvertible	securities)
1. Title of Deriv (Instr. 4)	vative Security	Expir	te Exercisable and ration Date Day/Year)	Securitie	nd Amount of s Underlying ve Security	4. Conversi or Exerc		wnership orm of	6. Nature of Indirect Beneficial Ownership (Instr. 5)

(Instr. 4)

Expiration Title

Date

Date

Exercisable

Price of

Security

Amount or

Number of

Shares

Derivative

Derivative Security:

Direct (D)

or Indirect

burden hours per response... 0.5

OMB 3235-0104 Number: January 31, 2005 Estimated average

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
I O	Director	10% Owner	Officer	Other		
WILKINSON WALTER H 1521 WESTBRANCH DR. SUITE 100 MCLEAN, VA 22102	ÂX	Â	Â	Â		
Signatures						
Michael LiCalsi - Attorney-in-Fact	10/14/2014					
**Signature of Reporting Person		Date				

Explanation of Responses:

No securities are beneficially owned

- * 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. 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.