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

(Print or Type Responses) 1. Name and Address of Reporting Person* Morrison Melissa			2. Issuer Name and Ticker or Trading Symbol GLADSTONE CAPITAL CORP [GLAD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) 1521 WESTBRANCH DR., SUITE 100			3. Date of Earliest Transaction (Month/Day/Year) 09/04/2014						X Officer (give title below) Other (specify below) Chief Financial Officer					
(Street) MCLEAN, VA 22102			4. If Amendment, Date Original Filed(Month/Day/Year)						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)	To	bla I - No	n_Dori	ivativa S	acuritias	Acqui	irad Disna	nsed of or I	Ranaficially ()wnod	
1.Title of S (Instr. 3)	Title of Security 2. Transaction		2A. Deemed Execution Date, if any	3. Transa Code (Instr. 8)	ection	tion 4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)			5. Amoun Beneficial Reported	nnt of Securities ially Owned Following d Transaction(s)		6. Ownership of Form:	Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	nd 4)		\ /	Ownership (Instr. 4)
Common	Stock		09/04/2014		P		125	A	\$ 9.69	375			D	
Reminder: 1	Report on a s	separate line for	each class of secur	ities beneficially ov	wned direc	Pers	ons who	respo			ction of inf	ormation		474 (9-02)
Reminder: I	Report on a s	separate line for	Table II - I	Derivative Securit	ies Acquir	Perso conta the fo	ons who ained in orm dis	respo this fo plays a f, or Ber	rm are curre	not requesting ntly valid	uired to res		s	474 (9-02)
1. Title of Derivative Security (Instr. 3)	•	3. Transaction Date (Month/Day/Y	Table II - I (3A. Deemed Execution Day any	Derivative Securities, puts, calls, was ten if Transaction Code (Instr. 8)	ies Acquir arrants, oj 5.	Persoconta the for ed, Dis- otions, 6. Da and I (Mor	ons who ained in orm dis	o respo this fo plays a f, or Ber ible secu isable n Date	rm are curre neficial rities) 7. To Amo Und Seco	not requesting ntly valid	OMB conf	pond unle	f 10. Ownersh Form of Derivativ Security: Direct (I or Indire	ip of Indire Benefici Owners! (Instr. 4)

P 41 0 N /	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Morrison Melissa 1521 WESTBRANCH DR. SUITE 100 MCLEAN, VA 22102			Chief Financial Officer				

Signatures

Michael LiCalsi, Attorney-in-fact	09/04/2014
**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.