FORM 4

(Print or Type Pecnonces)

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

OMB APPROVAL
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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 * Cutlip Robert G				2. Issuer Name and Ticker or Trading Symbol GLADSTONE COMMERCIAL CORP [GOOD]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director V Officer (give title below) Described to the Special and t						
1521 WE		(First) CH DRIVE	(Middle) E, SUITE 100		te of Earl 6/2015	liest	Trans	sactio	n (M	onth/Day	/Year)					President		
(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)			Ta	ble I	- Non	-Der	ivative S	Securitie	es Ac	cquir	ed, Dispo	osed of, or I	Beneficially	Owned	
(Instr. 3)		2. Transaction Date (Month/Day/Year)		,	(Instr. 8)		(A) or Disp		Disposed	es Acquired posed of (D) and 5)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)			Ownership of Form:	Beneficia		
				(Mont	h/Day/Y	ear)	Co	ode	V	Amoun	(A) or t (D)	Pri		(Instr. 3 and 4) Direct (D) or Indirect (I) (Instr. 4)		Ownershi (Instr. 4)		
Common	Stock		08/06/2015]	P		300	A	\$ 15.	.5	17,500			D	
Common Stock		08/06/2015]	P		700	A	\$ 15.	.53	18,200		D			
Reminder:	Report on a s	separate line fo	or each class of secur						Pers cont the f	sons wh tained in	no respo n this fo splays a	orm a cui	are irren	not requ tly valid	ction of inf ired to res OMB conf	spond unle	ss	1474 (9-02
1. Title of	2	3. Transactio			uts, calls 4.		rrant 5.	ts, op		, conver				le and	8. Price of	9. Number	of 10.	11. Na
	Conversion or Exercise Price of Derivative Security	Date (Month/Day/	Execution Da	ite, if	Transacti Code	ion 1		ative ities ired rosed) . 3,	and Expiration Date (Month/Day/Year) A U S (I 4		Amou Under Secur (Instr.			Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owners Form of Derivat Securit Direct or India	hip of Indi Benefi Owner (Instr. D)		
					Code	v	(A)	(D)	Date Exe		Expiration Date	on T		Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Cutlip Robert G 1521 WESTBRANCH DRIVE SUITE 100 MCLEAN, VA 22102			President					

Signatures

Michael LiCalsi, Attorney-in-fact	08/10/2015
**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.