## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
hours per response... 0.5

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

Responses	s)														
Name and Address of Reporting Person * Cutlip Robert G				2. Issuer Name and Ticker or Trading Symbol GLADSTONE COMMERCIAL CORP [GOOD]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below) Other (specify below)				
(Last) (First) (Middle) 1521 WESTBRANCH DRIVE, SUITE 100				3. Date of Earliest Transaction (Month/Day/Year) 12/07/2015									President		
(Street) MCLEAN, VA 22102			4. If	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
<u>′</u>	(State)	(Zip)		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned											
(Instr. 3)		2. Transaction Date (Month/Day/Year	Day/Year) Execution any		cution Date, if Code (Instr. 8)		ction	(A) or 1	(A) or Disposed of (Instr. 3, 4 and 5)		Beneficia Reported	ally Owned Following d Transaction(s)		Ownership Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
						Code	V	Amoun	t or (D)	Price					
Stock		12/07/2015				P		500 (1	) I A		24,900			D	
		Table II					the ted, D	form dis	splays a o	currei eficial	ntly valid	OMB con			
Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Day Year) any	l ate, if	4. Transaction Code (Instr. 8)		Jumber f Derivative decurities acquired A) or Disposed f (D) Instr. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Ti Amo Undo Secu (Inst 4)	Amount or Number	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficia Ownershi (Instr. 4)	
							LAC	reisaute	Date		of				
	Address of ert G  TBRAN  VA 221  Purity  Conversion of Exercise rice of Perivative	Address of Reporting Period (First) TBRANCH DRIVE (Street)  , VA 22102 (State)  Purity  3. Transaction Date (Month/Day/Derivative)	Address of Reporting Person ert G  (First) (Middle)  TBRANCH DRIVE, SUITE 100  (Street)  (Street)  2. Transaction Date (Month/Day/Year)  Stock 12/07/2015  Table II -  Conversion or Exercise rice of Derivative (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)	Address of Reporting Person 2.  GL GL [GG  (First) (Middle) 3. D 12/  (Street) 4. If  (VA 22102  (State) (Zip)  Date (Month/Day/Year)  Conversion of Exercise rice of Derivative  Address of Reporting Person 2.  (Middle) 3. D 12/  (Middle) 3. D 12/  (A. If  A. If  Street) 4. If  A. If  Street) 2.  Transaction Date (Month/Day/Year)  A. Deemed Execution Date, if any (Month/Day/Year)	Address of Reporting Person*  2. Issuer Nam GLADSTO! [GOOD]  3. Date of Earl 12/07/2015  (Street)  4. If Amendment  Address of Reporting Person*  (Middle) 3. Date of Earl 12/07/2015  4. If Amendment  2. Transaction Date (Month/Day/Year)  Address of Reporting Person*  3. Date of Earl 12/07/2015  4. If Amendment  2. Transaction Date (Month/Day/Year)  3. Transaction Date (e.g., puts, calls, any (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  3. Transaction Date (Month/Day/Year)  4. Transaction Code (Instr. 8)	Address of Reporting Person GLADSTONE (GOOD)  (First) (Middle) 3. Date of Earliest 12/07/2015  (Street) 4. If Amendment, If Amendment, If Month/Day/Year)  (State) (Zip) Table (Month/Day/Year)  (Stock 12/07/2015  Table II - Derivative Securities beneficially own of Execution Date (e.g., puts, calls, war of Exercise (Month/Day/Year) (Month/Day/Year)  Table II - Derivative Securities (e.g., puts, calls, war of Exercise (Month/Day/Year) (Month/Day/Year)  (Month/Day/Year) 3. Transaction Date (month/Day/Year) (Month/Day/Year) (Month/Day/Year)  (Month/Day/Year) 3. Transaction Date (month/Day/Year) (Month/Day/Year) (Month/Day/Year)	Address of Reporting Person 2. Issuer Name and Ticker GLADSTONE COMM [GOOD]  TBRANCH DRIVE, SUITE 100  (Street)  (Street)  (State)  (Zip)  Table I - No  Table I - No  Code  (Instr. 8)  Table II - Derivative Securities Acquir (e.g., puts, calls, warrants, or Texercise rice of Perivative  Transaction  Date  (Month/Day/Year)  A. Deemed  Execution Date, if any (Month/Day/Year)  Table II - Derivative Securities Acquir (e.g., puts, calls, warrants, or Texercise rice of Perivative  (Month/Day/Year)  Table II - Derivative Securities Acquir (e.g., puts, calls, warrants, or Code (Instr. 8)  Transaction  Date  Execution Date, if any (Month/Day/Year)  Table II - Derivative Securities Acquir (e.g., puts, calls, warrants, or Code (Instr. 8)  Transaction Date  (Month/Day/Year)  (Month/Day/Year)	Address of Reporting Person*- lert G  Address of Reporting Person*-  (Month Capy Person*-  Address of Reporting Person*-  (Address of Earliest Transaction (Machy Pear) and (Address of Execution Date, if Transaction Person*-  (Address of Earliest Transaction (Machy Pear) and (Address of Execution Date, if Transaction Person*-  (Address of Earliest Transaction (Machy Pear) and (Address of Execution Date, if Transaction Person*-  (Address of Earliest Transaction (Machy Pear) and (Address of Execution Date, if Transaction Person*-  (Address of Execution D	Address of Reporting Person - Per tr G  Address of Reporting Person - Per tr Andre Address of Securities Beneficially Owned directly or indirectly or indi	Address of Reporting Person*  Left G  Reft G	Address of Reporting Person*    Carrier G	Address of Reporting Person - GLADSTONE COMMERCIAL CORP [GOOD]  (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) 12/07/2015  (Street) 4. If Amendment, Date Original Filed(Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) 2. Transaction Date (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Persons who respond to the collection of Exercise (Month/Day/Year) (Mont	Address of Reporting Person - GLADSTONE COMMERCIAL CORP [GOOD]  (First) (Middle) 12/07/2015  (Street) (State) (Zip) (State) 2. Transaction (Month/Day/Year) 12/07/2015  (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Instruction Date (Month/Day/Year) (Month/Day/Year) (Instr. 3, 4 and 5)  (Stock) 12/07/2015 P	Address of Reporting Person are trianged to the Check all applications of the person of the person of the Check all applications of the person of the Check all applications of the person of the Check all applications of the person of the person of the Check all applications of the person o	Address of Reporting Person.*  2. Issuer Name and Ticker or Trading Symbol (GLaDSTONE COMMERCIAL CORP [GOOD]  (First) (Middle) (Street) 12/07/2015  (Street) 2. Transaction (Date (Month/Day/Year) 12/07/2015  (Street) 2. Transaction (Date (Month/Day/Year) 12/07/2015  (Street) 2. Transaction (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) (Month/Day/Year)  (Stock 12/07/2015 P

### **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	12/08/2015
**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).
- (1) The transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on March 10, 2014.

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.