## 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

(Print or Ty	pe Response	s)														
1. Name and Address of Reporting Person* WILKINSON WALTER H				2. Issuer Name and Ticker or Trading Symbol GLADSTONE COMMERCIAL CORP [GOOD]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_ Director Officer (give title below) Other (specify below)					
(Last) (First) (Middle) 1521 WESTBRANCH DRIVE, SUITE 100					3. Date of Earliest Transaction (Month/Day/Year) 02/25/2016											
(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 PersonForm filed by More than One Reporting Person						
(City	)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Datany (Month/Day/Y	on Date	(Instr. 8)			4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia	ant of Securities ally Owned Following d Transaction(s) and 4)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership	
				(			Code	V	Amour	(A) or (D)	Price		,		or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		02/25/2016				P		3,300	$\Delta$	\$ 14.64	6,613.3	99		D	
			Table II -				-	the f	tained i form di isposed	n this fo splays a of, or Bei	rm are curre	not requesting ntly valid	OMB con	spond unle trol numbe	ss	1474 (9-02)
Security (Instr. 3)			3A. Deemed Execution Da	4. Transaction Code Year) (Instr. 8)		5. Nu of Der Sec Acc (A) Dis of (In:	5. Number		and Expiration Date (Month/Day/Year)		7. Ta	itle and ount of lerlying urities tr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect	Beneficia Ownershi (Instr. 4)
				Code	Code '	V (A	(D)		e rcisable	Expiration Date	Title	or Number of Shares				

#### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
WILKINSON WALTER H 1521 WESTBRANCH DRIVE SUITE 100 MCLEAN, VA 22102	X						

### **Signatures**

Michael LiCalsi, Attorney-in-fact	02/25/2016
**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.