FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* Forman Michael C.				2. Issuer Name and Ticker or Trading Symbol FS Investment CORP [ FSIC ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner						
(Last) (First) (Middle) C/O FS INVESTMENT CORP. 201 ROUSE BOULEVARD					3. Date of Earliest Transaction (Month/Day/Year) 01/02/2018								X	Office	,	Other (specify below)		
(Street) PHILADELPHIA PA 19112				4. If <i>A</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
(City)	(St		(Zip)		4:									-:-!!-	0			
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day			tion 2A. D Exec y/Year) if any		a. Deemed recution Date,		3. 4.		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) o (D)	r Prid	ce	Report Transa (Instr. 3	ed ction(s) 3 and 4)		(Instr. 4)
Common	Stock			01/02/2	2018				<b>P</b> <sup>(1)</sup>		6,600	A	\$7	.4915	10	06,917	I	By Trust
Common Stock													924,609 <sup>(2)</sup>		I	By Franklin Square Holdings, L.P.		
Common Stock															12,6	39.712 <sup>(2)</sup>	I	By Spouse
Common Stock														3,1	.17.3 <sup>(2)</sup>	I	By Trust FBO Minor Children	
Common Stock														11,213.676 <sup>(2)</sup>		I	In 401(k) account	
Common Stock															7,680.563 <sup>(2)</sup>		I	In IRA account
		Ta									osed of, convertib				wned			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, T Security or Exercise (Month/Day/Year) if any C			4. Transac Code (In	. 5. Number of Derivative			6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Pri Deriv Secui (Instr		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
Evalenation of Donnerson			Code '	v	(A)	(D)	Date Expiration Date		Title	Amour or Number of Shares	er							

## Explanation of Responses:

- 1. The purchases were effected pursuant to a Rule 10b5-1 trading plan adopted by The 2011 Forman Investment Trust in multiple transactions at prices ranging from \$7.45 to \$7.50, inclusive. The price reported in Column 4 is the weighted average price. The reporting person disclaims beneficial ownership of any shares held by The 2011 Forman Investment Trust that exceed his pecuniary interest therein, and the inclusion of these shares in this report shall not be deemed an admission of beneficial ownership of all of the reported shares for purposes of Section 16 or for any other purpose.
- 2. Includes shares received through stock distributions and shares received on account of reinvested distributions.

/s/ Stephen S. Sypherd, Attorney-in-Fact

01/03/2018

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.