FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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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

| OMB APPRO | DVAL |
|------------------------|---------------------------------------|
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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* Adelman David J. | | | | | | 2. Issuer Name and Ticker or Trading Symbol FS Investment CORP [FSIC] | | | | | | | | | Relationshi leck all app X Direc | olicable) | | | to Issuer % Owner | | |
|---|-----|--|---------|----------------------------|---|---|---|--|-------------------------------|--------|---|---------------|---|------|---|------------------------|--|--|-----------------------|--|--|
| (Last) (First) (Middle) C/O FS INVESTMENT CORP. CIRA CENTRE 2929 ARCH STREET, SUITE 675 | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/04/2014 | | | | | | | | | Offic belov | cer (give title ow) | | | Other (specify below) | | |
| (Street) | | | | | - 4. I1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person | | | | | | |
| PHILADELPHIA PA 19104 | | | | - | | | | | | | | | Form filed by More than One Reporting Person | | | | | | | | |
| (City) | (St | | Zip) | | | | | | | | | | | | | | | | | | |
| | | Tabl | e I - N | | | 1 | | | _ | d, Di | sposed o | | | ial | | | | | | | |
| Date | | 2. Transaction Date (Month/Day/Year) | | Execution Date, ar) if any | | Transaction | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an 5) | | | Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transactio (Instr. 3 ar | tion(s) | | | (Instr. 4) | | |
| Common Stock | | | 12/04/2 | 014 | | | | J ⁽¹⁾ | | 22,228 | A | \$0 | | 22,2 | 22,228 | | I | By Darco Investments, LLC | | | |
| Common Stock | | | | | | | | | | | | | | 34,0 | 63 |] | D | | | | |
| Common Stock | | | | | | | | | | | | | 354,1 | 196 | | I | By Franklin Square Holdings, L.P. ⁽²⁾ | | | | |
| | | Та | ble II | | | | | | | | osed of, convertib | | | | Owned | | | | | | |
| 1. Title of 2. 3. Transaction Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any | | | | | I. Fransaction Code (Instr. B) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | e Exerc ation D h/Day/` | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | | 10. Ownersl Form: Direct (D or Indire (I) (Instr. | Beneficial Ownership ct (Instr. 4) | | | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amount or Number of Shares | | | | | | | | |

Explanation of Responses:

1. Pro-rata distribution from FSIC Holdings, LLC, of which the reporting person is a non-managing member. In prior reports, the reporting person reported indirect beneficial ownership of 78,800 shares of FS Investment Corporation held by FSIC Holdings, LLC. The remaining 56,572 shares of FS Investment Corporation were distributed on a pro-rata basis to the other members of FSIC Holdings, LLC. Darco Investments, LLC is a limited liability company controlled by the reporting person.

 $2. \ The \ reporting \ person \ disclaims \ beneficial \ ownership \ of \ any \ shares \ that \ exceed \ his \ pecuniary \ interest \ therein.$

/s/ Stephen S. Sypherd, 12/05/2014 Attorney-in-Fact

** Signature of Reporting Person Date

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

- * 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.