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

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* Oberbeck Christian L | | | | | | 2. Issuer Name and Ticker or Trading Symbol SARATOGA INVESTMENT CORP. [SAR] | | | | | | | | | k all app Direc Office | tor er (give title | | rson(s) to Is 10% Or Other (below) | wner | |
|--|--|-------|------------|--|----------------|---|--------|-----------|-----------------------------|------------------------------|---|--|---|---|---|--|---|---|---------------------------|--|
| | (First) (Middle) ARATOGA INVESTMENT CORP. ADISON AVENUE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/21/2020 | | | | | | | | | below) below) CEO and Director | | | | | |
| (Street) NEW YO | ORK N | Ý 1 | .0022 | | 4. If <i>i</i> | ment, | Date (| of Origii | nal File | ed (Month/Da | | 6. Indi Line) X | ′ | | | | | | | |
| (City) | (St | | Zip) | | | | | | | | | | | | | | | | | |
| | | Table | 1 - No | on-Deriva | tive S | Secu | rities | Acc | quirec | d, Dis | sposed of | , or B | enef | icially | Own | ed | | | | |
| Date | | | Date | 2. Transaction Date (Month/Day/Year) | | Execution Date, ar) if any | | | | 4. Securities Disposed Of | | and 5) Securities Beneficially Owned Following | | ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | Code | v | | | | | Amount | (A) or (D) | Pric | e | Transa | eported ansaction(s) estr. 3 and 4) | | | (Instr. 4) | | | | |
| Common | mon Stock | | 05/21/2020 | | | | | P | | 5,000 | A | \$14 | 1.91 ⁽¹⁾ | 749,435 | | D | | | | |
| Common | Stock | | | | | | | | | | | | | | 21 | 7,774 | | I | By CLO Partners LLC | |
| Common | Stock | | | | | | | | | | | | | | 15,375 I By chil | | | | By children | |
| Common | Stock | | | | | | | | | | | | | | 1 | ,011 | | I | By wife | |
| | | Tal | ble II | | | | | | | | osed of, convertib | | | | Owne | d | | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Execution Date, Transact Security or Exercise (Month/Day/Year) if any Code (In | | | | | | | Expira | e Exer ation D h/Day/ | | 7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) | | Dei Sec (Ins | Price of rivative curity str. 5) | | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Ownership Form: | Beneficial Ownership t (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amou or Numb of Share | er | | | | | | |

Explanation of Responses:

1. The price reported in Column 4 is a weighted-average price, rounded to the nearest hundredth. These shares were purchased in multiple transactions at prices ranging from \$14.83 to \$15.00 per share, inclusive. The reporting person undertakes to provide upon request by the staff of the Securities and Exchange Commission, Saratoga Investment Corp. (the "Issuer") or a security holder of the Issuer full information regarding the number of shares purchased at each separate price within the range set forth in this footnote.

> 05/22/2020 /s/ Christian Oberbeck

** 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.