FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, I | D.C. | 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 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).

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* KATZ SAMUEL L | | | | | | 2. Issuer Name and Ticker or Trading Symbol PENNANTPARK INVESTMENT CORP [PNNT] | | | | | | | | | k all app Direc | , | | erson(s) to Issuer 10% Owner Other (specify | | | |
|---|--|--|---------------------------------|---------------------------------|---------|--|--|--------------------------------------|------------------|--|-----------------------------|-----------------------------------|--------|-----------------------------|--|---|---|--|--|--|--|
| | (Fii NNANTPAI DISON AV | , | Middle) | | | te of E 3/202 | | t Trans | action (N | Month | /Day/Year) | | | | below | | | below) | ореспу ———————————————————————————————————— | | |
| (Street) NEW Y(| | | 0022 Zip) | | 4. If A | | | | | | | | | | | ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | | |
| Dat | | | 2. Transac Date (Month/Da | Day/Year) if | | 2A. Deemed Execution Date, if any (Month/Day/Year) | | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | 4 and Securit Benefic Owned | | ties cially Following | Forn (D) c | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership | | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Report Transa (Instr. 3 | action(s) . 3 and 4) | | | (Instr. 4) | | |
| Common Stock 12/03/ | | | | | 2020 | | | J ⁽¹⁾ | | 177,281 | D \$ | | \$4.62 | 11 | 11,710 | | D | | | | |
| Common Stock | | | | 12/03/2 | /2020 | | | | J ⁽¹⁾ | | 177,281 | A | | \$ 4.62 | 177,581 | | | I | Held by various related trusts | | |
| | | Tal | | | | | | | | | osed of, o | | | | Owne | d | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | emed ion Date, /Day/Year) | | nsaction of | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | | De Se | s. Price of Derivative Security Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Own Forn Dire or In (I) (II | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | Date Exercis | able | Expiration Date Title Share | | er | | | | | | | | |

Explanation of Responses:

1. On December 3, 2020, a family trust of which the reporting person is trustee acquired 177,281 shares of common stock of PennantPark Investment Corporation from the reporting person at a price of \$4.62 per share, the closing price traded on the Nasdaq Stock Market on such date.

Remarks:

/s/ Samuel L. Katz

12/07/2020

** Signature of Reporting Person

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.