FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Check this box if no longer subject to STAT Section 16. Form 4 or Form 5 | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
|--|--|
| obligations may continue. See | |
| Instruction 1(b). | Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 |

| | OMB APPRO | OVAL | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|
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| l | 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

| 1. Name and Address of Reporting Person* <u>Sarsynski Elaine A</u> | | | | | 2. Issuer Name and Ticker or Trading Symbol Horizon Technology Finance Corp [HRZN] | | | | | | | | heck all a | hip of Reportii pplicable) ector | ng Per | rson(s) to Is | | | |
|--|--|--|--|------------------------------|---|---|---|--|---|--------------------------------------|---|--|-------------|--|---|--|---|--|---|
| (Last) 312 FAR |) (First) (Middle) FARMINGTON AVENUE | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/07/2018 | | | | | | | | | | ficer (give title low) | | Other (specify below) | |
| (Street) FARMIN (City) | IGTON C | | 06032 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | ne) <mark>X</mark> Fo Fo | ividual or Joint/Group Filing (Check Applicable 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 | | | | | | | | | | | | | | | | | | |
| Date | | | | 2. Trans Date (Month/I | /Day/Year) if | | Execution if any | A. Deemed execution Date, any Month/Day/Year) | | Transaction Disposed Code (Instr. 5) | | ties Acquired (A) d Of (D) (Instr. 3, 4 | | | nd Seco Ben Owr | mount of urities eficially led Following orted | Forn (D) o | wnership n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | | | v | Amount | (A (C | () or () | Price | Tran | Transaction(s) (Instr. 3 and 4) | | | (11341.4) |
| Common Stock | | | | 05/07 | 7/2018 | | | | P | | 3,000 |) A \$ | | \$10 | 0(1) 5,000 | | | D | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution Date, if any (Month/Day/Year) 8) | | 4. Transa Code (8) | | nstr. Derivative Securities Acquired (A) or Disposed of (D) ((nstr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares | | ount | 8. Price o Derivative Security (Instr. 5) | | , G | 10. Ownership Form: Direct (D) Or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$9.98 to \$10.04, inclusive. Full information regarding the number of shares purchased at each separate price will be provided upon request by the SEC staff, the issuer, or any security holder of the issuer.

Remarks:

/s/Elaine A. Sarsynski 05/08/2018

** 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.