

Kayne Anderson MLP Investment CO  
 Form 3  
 May 25, 2010

**FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION**  
**Washington, D.C. 20549**

OMB APPROVAL

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**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,  
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section  
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â METROPOLITAN LIFE INSURANCE CO/NY			(Month/Day/Year)	Kayne Anderson MLP Investment CO [KYN]	
(Last)	(First)	(Middle)		4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
10 PARK AVENUE,Â P.O. BOX 1902				(Check all applicable)	
(Street)				___ Director	___X___ 10% Owner
				___ Officer	___ Other
				(give title below)	(specify below)
MORRISTOWN,Â NJÂ 07962					6. Individual or Joint/Group Filing(Check Applicable Line)
(City)	(State)	(Zip)			___X___ Form filed by One Reporting Person
					___ Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Kayne Anderson MLP Investment Company <u>(1)</u>	\$ 16,000,000	D	Â
Kayne Anderson MLP Investment Company <u>(2)</u>	\$ 2,000,000	D	Â
Kayne Anderson MLP Investment Company <u>(3)</u>	\$ 21,000,000	D	Â
Kayne Anderson MLP Investment Company <u>(4)</u>	\$ 4,000,000	D	Â
Kayne Anderson MLP Investment Company <u>(5)</u>	380,000	D	Â
Kayne Anderson MLP Investment Company <u>(6)</u>	900,000	D	Â

## Edgar Filing: Kayne Anderson MLP Investment CO - Form 3

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

SEC 1473 (7-02)

**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 control number.**

**Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)**

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date			
		Title	Amount or Number of Shares		

## Reporting Owners

### Reporting Owner Name / Address

### Relationships

Director	10% Owner	Officer	Other
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METROPOLITAN LIFE INSURANCE CO/NY  
10 PARK AVENUE  
P.O. BOX 1902  
MORRISTOWN, NJ 07962

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## Signatures

/s/ Daniel F. Scudder, Assistant General  
Counsel

05/25/2010

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 5(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).

- (1) 4.21%Series O Senior Unsecured Note Due 5/7/2015. See Exh 99-1.
- (2) 4.21%Series O Senior Unsecured Note Due 5/7/2015. See Exh 99-2.
- (3) FRN Series P Senior Unsecured Note Due 5/7/2015. See Exh 99-3.
- (4) FRN Series P Senior Unsecured Note Due 5/7/2015. See Exh 99-4.
- (5) Series A Mandatory Redeemable Preferred Shares. See Exh 99-5.
- (6) Series A Mandatory Redeemable Preferred Shares. See Exh 99-6.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure.

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