Number:

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2005

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Kayne Anderson MLP Investment CO Form 3 November 12, 2009 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB APPROVAL OMB

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 <u>*</u> METROPOLITAN LIFE INSURANCE CO/NY		S E (1	2. Date of Event Requiring Statement (Month/Day/Year) 11/04/2009		3. Issuer Name and Ticker or Trading Symbol Kayne Anderson MLP Investment CO [KYN]						
(Last) (Fin	rst) (N	fiddle)			4. Relationsh Person(s) to I	ip of Reporting ssuer		5. If Amendment, Date Origina Filed(Month/Day/Year)	ıl		
10 PARK AVEN	UE										
(Str	reet)			(Check all appl				6. Individual or Joint/Group			
MORRISTOWN	, NJ 0	7962			Director Officer (give title below	Other	•	Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City) (Sta	ate) ((Zip)		Table I - N	I - Non-Derivative Securities Beneficially Owned						
1.Title of Security (Instr. 4)				2. Amount of Beneficially ((Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•			
Kayne Anderson	MLP Inv	estment C	ompany	\$ 60,000,00	00	D	Â				
Kayne Anderson (2)	MLP Inv	estment C	ompany	\$ 50,000,00	00	D	Â				
Reminder: Report on owned directly or ind	-	ine for each	class of secu	rities beneficia	ally S	EC 1473 (7-02)				
	information required t	on contain to respond	ed in this f	ollection of orm are not form displa mber.	iys a						

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	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	

Reporting Owners

	Relationships					
Reporting Owner Name / Address		Director	10% Owner	Officer	Other	
METROPOLITAN LIFE INSURANCE C 10 PARK AVENUE MORRISTOWN, NJ 07962	O/NY	Â	ÂX	Â	Â	
Signatures						
/s/ Thomas C. Hoi, Assistant Secretary 11/12		.009				
**Signature of Reporting Person	Date					
Evelopedian of Deense						

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) 4.56% Series M Senior Unsecured Note due 11-4-2014. See Exhibit 99-1.

(2) Floating Rate Series N Senior Unsecured Note due 11-4-2014. See Exhibit 99-2.

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.