AGNC Investment Corp. Form 4 April 24, 2017

FORM 4

OMB APPROVAL

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

OMB Number: 3235-0287

Check this box if no longer subject to Section 16. Form 4 or Expires: January 31, 2005

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Estimated average burden hours per response... 0.5

Form 4 or Form 5 obligations may continue. See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * Davis Morris A.			2. Issuer Symbol	Name and	Ticker or Trading	5. Relationship Issuer	5. Relationship of Reporting Person(s) to Issuer				
			AGNC I	nvestme	nt Corp. [AGNC]	(Ch	eck all applicabl	e)			
(Last)	(First) (M	Middle)	3. Date of	Earliest Tr	ansaction						
	DA METRO 12TH FLOOR		(Month/Da 04/20/20	•		X Director Officer (gives	ve title Oth below)				
(Street)			4. If Amer	ndment, Da	te Original	6. Individual or	6. Individual or Joint/Group Filing(Check				
DETHECO	A MD 20014		Filed(Mont	h/Day/Year)	Applicable Line) _X_ Form filed by Form filed by	, ,				
BETHESD	A, MD 20814					Person		1 0			
(City)	(State)	(Zip)	Table	I - Non-D	Perivative Securities A	cquired, Disposed	of, or Beneficia	ally Owned			
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)			3. Transacti Code	4. Securities onAcquired (A) or Disposed of (D)	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	7. Nature Indirect Beneficia			

1.11ttle of	2. Transaction Date	ZA. Deemed	3.	4. Securit	1es		5. Amount of	6. Ownersnip	/. Nature of
Security	(Month/Day/Year)	Execution Date, if	Transactio	nAcquired	(A) o	r	Securities	Form: Direct	Indirect
(Instr. 3)		any	Code	Disposed of (D)		Beneficially	(D) or	Beneficial	
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned	Indirect (I)	Ownership
							Following	(Instr. 4)	(Instr. 4)
					(4)		Reported		
					(A)		Transaction(s)		
			Code V	Amount	or (D)	Price	(Instr. 3 and 4)		
Common									
Stock, par value \$0.01	04/20/2017		A	6,050	A	<u>(1)</u>	21,477.575 (2)	D	
per share									

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

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SEC 1474

(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

of

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	2.	3. Transaction Date		4.	5.	6. Date Exerc		7. Titl		8. Price of	9. Nu
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transact Code (Instr. 8)	orNumber of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	:		Amou Under Securi (Instr.	lying	Derivative Security (Instr. 5)	Deriv Secur Bene Own Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
·r· · · · · · · · · · · · · · · · · · ·	Director	10% Owner	Officer	Other			
Davis Morris A. 2 BETHESDA METRO CENTER 12TH FLOOR BETHESDA, MD 20814	X						

Signatures

/s/ Kenneth L. Pollack, as Attorney-in-Fact

04/21/2017

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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).
- (1) Represents restricted stock units ("RSUs") granted to the Reporting Person under the AGNC Investment Corp. 2016 Equity and Incentive Compensation Plan. The Common Stock underlying the RSUs will vest, subject to certain limitations, on May 20, 2018.
- (2) Includes 1,542.122 shares of stock received pursuant to the reinvestment of cash dividends and dividend equivalent units on previously granted RSU awards since the Reporting Person's last Form 4 filing.

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.

Reporting Owners 2