## Edgar Filing: MFA FINANCIAL, INC. - Form 4

MFA FINAN	NCIAL, INC.										
Form 4											
August 10, 2	015										
FORM	14									PPROVAL	
	UNITED	STATES		ITIES A hington,			NGE (	COMMISSION	OMB Number:	3235-0287	
Check thi if no long							Expires:	January 31,			
subject to		IENT OI	F CHAN	GES IN BENEFICIAL OW				NERSHIP OF	Estimated a	2005 average	
Section 1				SECUR	ITIES				rs per		
Form 4 or Form 5		august to S	Section 16	S(n) of the	Socuriti		vahana	ha Act of 1034	response	0.5	
obligation	ns Section 17(s						-	ge Act of 1934, f 1935 or Sectio	n		
may conti See Instru	inue.			vestment	•	· ·			11		
1(b).					· · · · ·						
(Print or Type R	Responses)										
1. Name and Address of Reporting Person *       2. Issuer         Knutson Craig L       Symbol				suer Name <b>and</b> Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer			
	•		•	NANCIA	L, INC.	[MF]	A]				
(Last)	(First) (N	(liddle)		Earliest Tra			-	(Chec	k all applicable	e)	
()	()	)	(Month/Da		liisdetion			Director	10%	Owner	
C/O MFA F	INANCIAL, INC	2., 350	08/10/20	-				XOfficer (give below)	e title Other below)	er (specify	
PARK AVE	NUE, 20TH FLC	OOR						· · · · · · · · · · · · · · · · · · ·	sident & COO		
(Street) 4. If Ame				endment, Date Original				6. Individual or Joint/Group Filing(Check			
				th/Day/Year)	-			Applicable Line)			
NEW YOR	<b>X N X X X X X X X X X X</b>							_X_ Form filed by ( Form filed by N	One Reporting Pe Iore than One Re		
NEW YORE	K,, NY 10022							Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	Securi	ties Acc	uired, Disposed of	f, or Beneficial	lly Owned	
1.Title of	2. Transaction Date	e 2A. Deei	med	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	on Date, if Transaction(A) or Disposed of					Securities	Form: Direct			
(Instr. 3)		any (Month/I	Code (D) Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Beneficially Owned	(D) or Indirect (I)	Beneficial Ownership	
		(11101111)	Suj, i cui)	(111541.0)	(msu: 5,	i una	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				<u> </u>		or	<b>D</b> .	(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price				
Stock, par					7,500		\$				
value \$0.01	08/10/2015			Р	(1)	А	7 38	402,025	D		

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

per share

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.

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 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)	4. Transac Code (Instr. 8	5. tionNumber of ) Derivativ Securitie: Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	S I	Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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							
Reporting O when I turk	Director	10% Owner	Officer	Other					
Knutson Craig L C/O MFA FINANCIAL, 350 PARK AVENUE, 20 NEW YORK,, NY 10022			President & COO						
Signatures									
/s/Craig L. Knutson	08/10/2015	í							
<u>**</u> Signature of	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) Shares purchased in a self-directed IRA/401(k) account.

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 Person