Edgar Filing: Davis Morris A. - Form 4

Davis Morris	s A.										
Form 4											
September 0	5, 2018										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287			
Check th	is box		vv as	sinington,	D.C. 20	549				January 31,	
if no long		MENT O	F CHAN	GES IN	BENEF	ICIA	LOW	NERSHIP OF	Expires: 20		
subject to Section 1)			SECURITIES					Estimated average		
Form 4 o									burden hours per response 0.5		
Form 5	Filed pu	ursuant to	Section 1	6(a) of the	e Securit	ies E	xchang	e Act of 1934,		0.0	
obligation may cont		7(a) of the	Public U	tility Hold	ling Cor	npan	y Act of	1935 or Section	1		
See Instru		30(h)	of the In	vestment	Compar	y Ac	t of 194	0			
1(b).											
(Print or Type I	Responses)										
1 Name and A	ddress of Reportin	g Person *	2 Iagua	Nome and	Tielsen on	Tradi		5. Relationship of	Reporting Pers	son(s) to	
1. Name and Address of Reporting Person * Davis Morris A.2. Issuer Symbol				Name and Ticker or Trading				Issuer			
			-	Investment Corp. [AGNC]							
(Lest)	(First)	(MGddla)			•	[10]		(Checl	k all applicable	;)	
(Last) (First) (Middle) 3. Date of				ansaction			X Director	X Director 10% Owner			
2 BETHESDA METRO (Month/D 09/04/20			-			Officer (give titleOther (specify					
	2TH FLOOR		0710112	010				below)	below)		
	(Street)		4 If Ame	ndment Da	te Origina	1		6. Individual or Jo	int/Groun Filir	or (Check	
Filed(Mon			endment, Date Original nth/Dav/Year)				Applicable Line)				
							X Form filed by One Reporting Person				
BETHESDA	A, MD 20814							Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)				~					
(eng)	(blute)	(24)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da			3. T	4. Securi		-	5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year	r) Execution any	on Date, if	Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)				Securities Beneficially	Form: Direct (D) or	Beneficial	
(Instr. 5) any (Month/Day/Ye			Day/Year)					Owned	Ownership		
								Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
				Code V	A	or	Duiters	(Instr. 3 and 4)			
Common				Code V	Amount	(D)	Price				
Stock, par							\$	20,482.946			
value \$0.01	09/04/2018			S	6,797	D	ф 19.12	(1) (1)	D		
per share											

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

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 Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: Davis Morris A. - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno 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						
	Director	10% Owner	Officer	Other			
Davis Morris A. 2 BETHESDA METRO CENTER 12TH FLOOR BETHESDA, MD 20814	Х						
Signatures							
/s/ Kenneth L. Pollack, as Attorney-in-Fact	09/05/2018						
**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) Includes 825 dividend equivalent restricted stock units received 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.