Edgar Filing: American Capital Agency Corp - Form 4

American Capital Agency Corp Form 4 September 02, 2015

September 0	2, 2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549									OMB Number:	3235-0287	
Check th if no lon	oer.			Expires:	January 31, 2005						
subject to Section 1 Form 4 c	STATEN 16.	IENT O	F CHAN	NERSHIP OF	Estimated average burden hours per response 0						
Form 5 obligations may continue. See Instruction 1(b). 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)										
Dalita Davidar E			2. Issuer Symbol	r Name and	I Ticker of	r Tradi	ing	5. Relationship of Reporting Person(s) to Issuer			
	America [AGNC	an Capita []	ll Agency	y Coi	р	(Check all applicable)					
				of Earliest Transaction h/Day/Year)				X Director 10% Owner Officer (give title Other (specify below) below)			
2 BETHES CENTER, 1	08/31/2015										
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)				al		6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
BETHESDA, MD 20814								Form filed by More than One Reporting Person			
(City)	(State)	(Zip)	Tabl	le I - Non-I	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	. Transaction Date 2A. Deemed Month/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securi on(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following	OwnershipIForm: DirectI(D) orOIndirect (I)O	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common				Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)		
Stock, par value \$0.01 per share	08/31/2015			S	4,500	D	\$ 19.178 (1)	32,439 <u>(2)</u>	D		

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

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	unt of rlying	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								
	Director	10% Owner	Officer	Other				
Dobbs Randy E. 2 BETHESDA METRO CENTER 14TH FLOOR BETHESDA, MD 20814	Х							
Signatures								
/s/ Samuel A. Flax, as Attorney-in-Fact		09/02/2015						
**Signature of Reporting Person		Date						
Explanation of Responses:								

nesponse

- * 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).
- Price reflects weighted average sales price; actual sale prices ranged from \$19.17 to \$19.18. The reporting person undertakes to provide, (1) upon request by the Commission staff, the issuer or a security holder of the issuer, information regarding the number of shares sold at each separate price.

Includes 40.110, 38.103, 61.595, 59.055, 100.922 and 102.281 dividend equivalents on RSUs previously granted under the Plan and shares received pursuant to the reinvestment of cash dividends on deferred distributions of vested RSU awards previously granted under

(2) the Plan, in connection with cash dividends declared by the Company to holders of record of common stock as of April 30, 2015, May 29, 2015, April 30, 2015, May 29, 2015, June 30, 2015 and July 31, 2015, respectively.

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.