FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Kain Gary D						2. Issuer Name and Ticker or Trading Symbol American Capital Agency Corp [AGNC]									(Check	all app Dired	olicable)	g Person(s) to I 10% (Other	
(Last) (First) (Middle) 2 BETHESDA METRO CENTER 14TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 02/17/2016										X	belov	w) ``	below t and CIO	
(Street) BETHESDA MD 20814					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)							ar)		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				son
(City)	(St		Zip)	on Doriv	ative Securities Acquired, Disposed of, or Benefi									ofic	برااما	0.4/0			
1. Title of Security (Instr. 3) 2. Transac Date				2. Transacti	on	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or			A) or	5. Amou nd 5) Securiti Benefici		ount of ties cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount		(A) or (D)	Pric	e	Trans	action(s) 3 and 4)		(Instr. 4)
Common Stock, par value \$0.01 per share				02/17/20	02/17/2016				A		122,745.484		A		(1)	1,425,707(2)		D	
Common Stock 02				02/19/20	02/19/2016				S		7,747 ⁽³⁾		D	\$1	7.96	1,4	417,960	D	
Common Stock, par value \$0.01 per share																2,500	I	By custodial account for child	
Common Stock, par value \$0.01 per share														2,500		I	By custodial account for child		
		Та	ble II								osed of, convertib					wned			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execut if any	Execution Date, if any		4. Transaction Code (Instr. B)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		e Exerc tion D n/Day/`		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		I nstr. 3	Deri Secu (Inst		rative derivative rity Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Codo	v	(0)	(D)	Date	sable	Expiration	Title	or Nu of	mber					

Explanation of Responses:

- 1. Date of final allocation of number of shares of AGNC common stock purchased with a cash award made under the American Capital Mortgage Management, LLC Performance Plan AGNC.
- 2. Includes 7,578.058, 8,063.695, 7,659.818, 8,014.138, 8,111.667, 8,268.283, 8,211.578, 9,065.727, 9,321.260, 9,280.260, and 9,352.229 shares of common stock received pursuant to the reinvestment of cash dividends declared by the Company to holders of record of common stock as of March 31, 2015, April 30, 2015, May 29, 2015, June 30, 2015, July 31, 2015, August 31, 2015, September 30, 2015, October 30, 2015, November 30, 2015, December 31, 2015 and January 29, 2016, respectively.
- 3. Sales made pursuant to a previously established Rule 10b5-1 Plan solely to cover required tax withholding upon vesting of stock awards.

Remarks:

Gary Kain

02/19/2016

** Signature of Reporting Person

Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.