FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL										
OMB Number:	3235-0287									
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	Check this box if no longer subject
\Box	to Section 16. Form 4 or Form 5
\cup	obligations may continue. See
	Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

							, , , ,				ompany Act	0. 20 .0								
Name and Address of Reporting Person* Davis Morris A.					2. Issuer Name and Ticker or Trading Symbol AGNC Investment Corp. [AGNC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Davis Wollis A.														X	Direc	tor		10% Ov	wner	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 07/27/2023										Office	er (give title v)		Other (s below)	specify	
7373 WISCONSIN AVENUE					Δ If Δ	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
22ND FLOOR				4. II Amendment, Date of Original Filed (Month/Day/Year)									Line)							
22ND PLOOK														X Form filed by One Reporting Person						
(Street) BETHESDA MD 20814			1											Form Perso	i filed by Mo on	re tha	n One Rep	orting		
DETHE	DA IVI	D 2	.001	4	Rule 10b5-1(c) Transaction Indication															
,					Rui	5 T(-200	T(C) ira	เทรล	ction inc	ııcat	ion							
(City)	(St	ate) (2	Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to															
											ditions of Rule					duction of win	illen þi	an mai is ini	ended to	
												_								
		Table	I - N	lon-Derivat	tive S	ecui	rities	Ac	quire	d, Di	sposed o	f, or l	Benefic	ially	/ Owr	ned				
1. Title of Security (Instr. 3) 2. Transaction Date				Execution Da			e, T	3. Fransac								Form: Direct		7. Nature of Indirect Beneficial		
(Month/Day/\				(WOIIIII/Day/Te					Code (Instr. 8)						Owned Following		(D) or Indirect (I)	ect (I)	Ownership	
									Code	v	Amount	(A) or (D)	Price		Transa	Reported (I Transaction(s) (Instr. 3 and 4)		Instr. 4)	(Instr. 4)	
Common Stock, par value \$0.01 per share 07/27/202					23				P		4,772	A	\$10.47	6 ⁽¹⁾ 55,059.946 ⁽²⁾			D			
															_	_				
		Tab	le I	I - Derivativ e.g., pu							posed of, convertil				Owne	ed				
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Executio Security or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expir (Mon	ite Exe ration I ith/Day		e and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		8. Price Derivat Securit (Instr. 5		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly Di or (I)	.0. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. The reported price is a weighted average. The shares were sold in multiple transactions at prices ranging from \$10.475 to \$10.477, inclusive. The Reporting Person undertakes to provide to the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.
- 2. Includes 1,545 dividend equivalent restricted stock units received on previously granted RSU awards since the Reporting Person's last Form 4 filing.

/s/ Kenneth L. Pollack, as Attorney-in-Fact 07/28/2023

** 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.