FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol AGNC Investment Corp. [AGNC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Pollack Kenneth L.					1	TIONG INVESTMENT COLP. [ACINC]										Direc	tor	10%	Owner	
(Last) (First) (Middle)					2 0	2. Date of Farlicet Transaction (Month/DayNear)								\dashv	X	Officer (give title below)		Oth belo	er (specify w)	
(Last)	`		3. Date of Earliest Transaction (Month/Day/Year) 03/01/2017									SVP and General Counsel								
AGNC INVESTMENT CORP.					03/	03/01/2017														
2 BETHESDA METRO CENTER, 12TH FLOOR																				
					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6.	6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Li	ne)					
BETHES	SDA N	ID :	20814												X	Form	filed by One	e Reporting Pe	erson	
																		re than One R	eporting	
(0:1.)	,,		(:)													Perso	OH			
(City)	(\$	State)	(Zip)																	
		Tab	le I - Nor	n-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	of, or	Bene	eficia	ally O	wne	ed			
1. Title of S	Security (Ins	tr. 3)		2. Trans	action	2A. Deemed Execution Date,			3. Transa	3. 4. Securities Acquired (A) Transaction Disposed Of (D) (Instr. 3,						. Amo Securit	unt of	6. Ownership Form: Direct	7. Nature of Indirect	
(Month/D					Day/Ye			,	Code (Code (Instr. 5)					Bene Own Repo		cially Following	(D) or Indirect (I) (Instr. 4)	Beneficial Ownership	
								ayi reai	′ °′ —		ļ I			ed			(1) (111511. 4)	(Instr. 4)		
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				
Common Stock 03/01/					1/2017				A		6,188	B A ((1	7,188		D			
		T:	able II - D)erivat	ive S	ecu	rities	Δcaui	ired Di	isno	sed of	or B	enefi	riall [,]	v Ow	ned			*	
		.,									onvertib				,	cu				
1. Title of Derivative	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution		4. Transaction		n of		6. Date Exercisable and Expiration Date		е	7. Title and Amount of			8. Price of Derivative Security (Instr. 5)		9. Number of derivative	Ownership	11. Nature of Indirect	
Security (Instr. 3)			if any (Month/Da	ıy/Year)	Code (ode (Instr.		Derivative (I Securities Acquired (A) or		(Month/Day/Year)			rities erlying				Securities Beneficially	Form: Direct (D)	Beneficial Ownership	
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	Security					Disposed		and			ırity (In: 4)	su. s	<u> </u>		Reported	1	"			
						of (D) (Instr. 3, 4										Transaction(s (Instr. 4)	(s)			
						and 5)										` ,				
				[Am	ount						
						l							or Nun	nber						
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	of							
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Explanation of Responses:

1. Represents restricted stock units ("RSUs") granted under the AGNC Investment Corp. 2016 Equity and Incentive Compensation Plan. The awards were received as a grant for no consideration. The common stock underlying the RSUs will vest, subject to certain limitations, in equal installments, on each of March 15, 2018, March 15, 2019 and March 15, 2020.

Remarks:

Kenneth L. Pollack 03/03/2017

** 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.