Orchid Island Capital, Inc.

Form 4

January 09, 2015

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Expires: 2005 Estimated average burden hours per response... 0.5

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Number:

OMB APPROVAL

3235-0287

January 31,

Section 16. Form 4 or Form 5 obligations may continue. See Instruction

Check this box

if no longer

subject to

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

1(b).

Common

Stock

01/07/2015

(Print or Type Responses)

1. Name and Address of Reporting Person * Parker Ava L			2. Issuer Symbol	Name and	Ticker or Trading	5. Relationship of Reporting Person(s) to Issuer				
		Orchid 1	Island Ca _l	oital, Inc. [ORC]	(Check all applicable)					
(Last)	(First) (Middle)	3. Date of	Earliest Tra	ansaction					
			(Month/D	ay/Year)		_X_ Director		Owner		
C/O ORCHID ISLAND CAPITAL, INC., 3305 FLAMINGO DR.		01/07/2	015		Officer (give below)	titleOthe	r (specify			
INC., 3305	FLAMINGO DE	ί.								
(Street)		4. If Ame	ndment, Da	te Original	6. Individual or Joint/Group Filing(Check					
			Filed(Mor	nth/Day/Year)		Applicable Line) _X_ Form filed by One Reporting Person				
VERO BEA	ACH, FL 32963					Form filed by M Person	Iore than One Re	porting		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Securities Acq	uired, Disposed of	, or Beneficial	ly Owned		
1.Title of	2. Transaction Dat	e 2A. Deer	ned	3.	4. Securities Acquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Executio	Execution Date, if		on(A) or Disposed of (D)	Securities	Form: Direct	Indirect		
(Instr. 3)		any		Code	(Instr. 3, 4 and 5)	Beneficially	(D) or	Beneficial		
		(Month/I	Day/Year)	(Instr. 8)		Owned	Indirect (I)	Ownership		
						Following	(Instr. 4)	(Instr. 4)		
					(A)	Reported				
					(A)	Transaction(s)				

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

(Instr. 3 and 4)

D

8,216

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

Code V Amount (D)

or

Price

13.05

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	1. Title of	2.	3. Transaction Date	3A Deemed	4.	5.	6. Date Exerc	cicable and	7 Tit	le and	8. Price of	9. Nu
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transaction		Expiration D			unt of	Derivative	Deriv
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Unde	rlying	Security	Secui
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Secur	rities	(Instr. 5)	Bene
		Derivative				Securities			(Instr	. 3 and 4)		Owne
		Security				Acquired				,		Follo
						(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						(Instr. 3,						(IIIsti
						4, and 5)						
										Amount		
										or		
							Date	Expiration	TT:41			
						Exercisable	Date	Title	Number			
										of		
					Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

X

Parker Ava L

C/O ORCHID ISLAND CAPITAL, INC. 3305 FLAMINGO DR. VERO BEACH, FL 32963

Signatures

/s/ Ava L Parker 01/09/2015

**Signature of Parker Date
Reporting Person

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) These shares were issued in consideration for service on the Issuer's Board of Directors at a price of \$13.05 per share, which represents the closing price of the stock on December 31, 2014.

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.

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