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American Capital Agency Corp Form 4 February 20, 2014

February 20,	, 2014										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION							OMB APPROVAL				
Washington, D.C. 20549								OMB Number:	3235-0287		
Check th if no long subject to Section 1 Form 4 o	ger STATI 16.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								January 31, 2005 verage rs per 0.5	
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 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).											
(Print or Type I	Responses)										
1. Name and Address of Reporting Person *2. IssuerERICKSON JOHN RSymbol			r Name and Ticker or Trading				5. Relationship of Reporting Person(s) to Issuer				
America [AGNC]				can Capital Agency Corp				(Check all applicable)			
			f Earliest Transaction Day/Year)				_X_ Director 10% Owner _X_ Officer (give title Other (specify				
CORP., 2 B	N CAPITAL A ETHESDA MI 4TH FLOOR		02/06/20					below)	below) /P and CFO		
				ndment, Date Original hth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
BETHESDA	A, MD 20814								Iore than One Re		
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any	ned n Date, if Day/Year)	3. Transactic Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	02/06/2014			Code V P	Amount 2,000		Price \$ 21.71	(Instr. 3 and 4) 2,000	I	Family Trust	
Reminder: Ren	oort on a senarate l	ine for each cl	ass of secu	rities benefi	cially own	ned dir	rectly or i	ndirectly			

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 control number.

 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. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
ERICKSON JOHN R AMERICAN CAPITAL AGENCY CORP. 2 BETHESDA METRO CENTER, 14TH FLOOR BETHESDA, MD 20814	Х		EVP and CFO			
Signatures						
1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -						

John Erickson 02/20/2014 <u>**</u>Signature of

Reporting Person

Date

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).

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.