## Edgar Filing: Armour Residential REIT, Inc. - Form 4

Armour Resid Form 4 April 05, 201 <b>FORM</b>	Л									PPROVAL	
. •	• • UNITED S	ED STATES SECURITIES AND EXCHANGE COM Washington, D.C. 20549						COMMISSION	OMB Number:	3235-0287	
Check thi if no long subject to Section 10 Form 4 or	er <b>STATEM</b> 6.	X				GES IN BENEFICIAL OWNERSHIP OF SECURITIES					
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section 17(a	response 0. Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940									
(Print or Type R	lesponses)										
1. Name and Address of Reporting Person <u>*</u> Downey Carolyn			2. Issuer Name <b>and</b> Ticker or Trading Symbol					5. Relationship of Reporting Person(s) to Issuer			
			Armour Residential REIT, Inc. [ARR]					(Check all applicable)			
(Mo				3. Date of Earliest TransactionX_ Director (Month/Day/Year)Officer (g 04/03/2017					ve title 10% Owner Other (specify below)		
(Street) 4. If Am				If Amendment, Date Original led(Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>			
VERO BEA	CH, FL 32963							Form filed by Person	More than One R	eporting	
(City)	(State) (	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	of, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)		Transaction Date 2A. Deemed Aonth/Day/Year) Execution Date, if any (Month/Day/Year)			4. Securi onAcquired Disposed (Instr. 3,	l (A) o l of (D	)	SecuritiesHBeneficially(i)OwnedHFollowing(i)ReportedTransaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, par				Code V	Amount		Price	(Instr. 3 and 4)			
value \$0.001 per share	04/03/2017			A <u>(1)</u>	726	A	<u>(1)</u>	10,549	D		

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

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.

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 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. Transacti Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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 / Addr	ess	Relationships							
Toporting o whot I white / I war	Director	10% Owner	Officer	Oth					
Downey Carolyn 3001 OCEAN DRIVE SUITE 201 VERO BEACH, FL 32963	Х								
Signatures									
/s/ Carolyn Downey	04/05/2017								
**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).

On April 3, 2017, the reporting person received 726 shares of ARMOUR common stock pursuant to quarterly compensation paid for the reporting person's service on ARMOUR's Board of Directors. Commencing with the reporting person's first day of service on

(1) ARMOUR's Board of Directors, effective September 2, 2013, the reporting person may elect to receive \$16,500 of the reporting person's total quarterly compensation (or \$66,000 on an annual basis) paid in common stock, cash, or a combination of stock and cash at the option of the director. The 726 shares of stock represent the reporting person's election of stock compensation for the past quarter.

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.