Edgar Filing: MFA FINANCIAL, INC. - Form 4

	NCIAL, INC.										
Form 4 December 11	1. 2015										
FORM A									OMB APPROVAL		
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMB Number:	3235-0287		
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue Check this box STATEMENT OF CHANG STATEMENT OF CHANG Filed pursuant to Section 16 Section 17(a) of the Public Ut				SECUR 6(a) of the ility Hold	ITIES Securiti ing Com	es Ez pany	xchang Act o	ge Act of 1934, f 1935 or Sectio	Expires: Estimated a burden hou response n	irs per	
See Instru 1(b).	uction	30(n)	of the Inv	vestment	Compan	y Aci	. 01 19	40			
(Print or Type I	Responses)										
Schwartz Harold E Symbol			Symbol	r Name and Ticker or Trading INANCIAL, INC. [MFA]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	Middle)	3. Date of Earliest Transaction (Check					ck all applicable	an applicable)		
	FINANCIAL, IN ENUE, 20TH FL		(Month/Da 12/09/20	-				Director X Officer (give below) Senic		6 Owner er (specify nt	
	(Street)		Filed(Month/Day/Year) A				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person				
NEW YOR	K, NY 10022								Aore than One Ro		
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	any		emed on Date, if /Day/Year)	3. 4. Securities TransactionAcquired (A) (Code Disposed of (I (Instr. 8) (Instr. 3, 4 and		l (A) c l of (D 4 and))	Securities D Beneficially (Owned D	6. Ownership Form: Direct D) or Indirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	12/09/2015			A	8,383 (1)	A	\$ 0	34,609	D		
Common Stock	12/09/2015			F	3,458 (2)	D	\$ 6.8	31,151	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.

Edgar Filing: MFA FINANCIAL, INC. - Form 4

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)	4. Transactic 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 unt of rlying rities . 3 and 4)	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		

Reporting Owners

Reporting Owner Name / Address		Relationships						
To Porting O more sumo (sources	Director	10% Owner	Officer	Other				
Schwartz Harold E C/O MFA FINANCIAL, INC. 350 PARK AVENUE, 20TH FLOOR NEW YORK, NY 10022			Senior Vice President					
Signatures								
/s/ Harold E. 12/11/20 Schwartz	15							

**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).

The shares acquired by the Reporting Person were received as a portion of the Reporting Person's annual incentive compensation and are fully vested as of the date of grant. The net shares acquired (i.e., net of the surrender of a portion of the shares acquired in order to satisfy

- (1)tax obligations (as described in Note 2 below)) are subject to a three-year holding period and may not be sold or otherwise transferred prior to December 9, 2018.
- The reported disposition represents the surrender of shares to satisfy tax obligations arising from the receipt by the Reporting Person of (2) the shares described in Note 1 above.

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.