FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

| OMB APPRO |
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| OMB Number:              | 3235-0287 |
|--------------------------|-----------|
| Estimated average burden |           |
| hours per response:      | 0.5       |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

|   |                |          | 2. Issuer Name <b>and</b> Ticker or Trading Symbol DYNEX CAPITAL INC [ DX ] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) |                                |                       |  |  |  |
|---|----------------|----------|---|---|--------------------------------|-----------------------|--|--|--|
|   |                |          | [   | X   | Director                       | 10% Owner             |  |  |  |
| (Last) (First) (Middle) C/O DYNEX CAPITAL, INC. |                | (Middle) |   | X   | Officer (give title below)     | Other (specify below) |  |  |  |
|   |                | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 03/08/2021                 |   | CEO and Co-C                   | CIO                   |  |  |  |
| 4991 LAKE BROO                                  | K DRIVE, SUITE | 100      |   |   |                                |                       |  |  |  |
| (Street)  |                |          | 4. If Amendment, Date of Original Filed (Month/Day/Year)                    | 6. Indivi   | dual or Joint/Group Filing (Ch | eck Applicable Line)  |  |  |  |
| GLEN ALLEN                                      | VA             | 23060    |   | X   | Form filed by One Reporting    | g Person              |  |  |  |
|   |                |          |   |   | Form filed by More than On     | ne Reporting Person   |  |  |  |
| (City)  | (State)        | (Zip)    |   |   |                                |                       |  |  |  |

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Code (Ir | 3. Fransaction Code (Instr. 3, 4 and 5) Code (Instr. 3) |        |               | 5. Amount of<br>Securities<br>Beneficially Owned<br>Following Reported<br>Transaction(s) | 6. Ownership<br>Form: Direct (D)<br>or Indirect (I)<br>(Instr. 4) | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |                           |
|---------------------------------|--|---|----------|---|--------|---------------|--|---|---|---------------------------|
|                                 |  |   | Code     | v   | Amount | (A) or<br>(D) | Price  | (Instr. 3 and 4)  |   | (111341. 4)               |
| Common Stock                    | 03/08/2021                                 |   | P        |   | 1,635  | A             | \$18.35  | 330,326   | D   |                           |
| Common Stock                    |  |   |          |   |        |               |  | 10,721.479  | I   | Through<br>401(k)<br>Plan |

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

| 1. Title of<br>Derivative<br>Security (Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | Execution Date, if any (Month/Day/Year)    Execution Date, if any Code (Instr. 8)   Sample Code (Instr. 8)   Code (Instr | 5. Numl<br>Derivati<br>Securiti<br>Acquire<br>or Disp<br>(D) (Instand 5) | ive<br>ies<br>ed (A)<br>osed of | (Month/Day/Year) |     | Securities Underlying |                    | Derivative<br>Security<br>(Instr. 5) |                                  | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |
|--|---|--|--|--|---------------------------------|------------------|-----|-----------------------|--------------------|--------------------------------------|----------------------------------|---|--|--|
|  |   |  |  | Code   | v                               | (A)              | (D) | Date<br>Exercisable   | Expiration<br>Date | Title                                | Amount or<br>Number of<br>Shares |   | Transaction(s)<br>(Instr. 4)                                       |  |

Explanation of Responses:

Remarks:

Alison G. Griffin, attorney-in-fact 03/08/2021

\*\* Signature of Reporting Person

Date

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

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).