Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
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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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>LINNEMAN PETER</u> | | | | | <u>AG</u> | 2. Issuer Name and Ticker or Trading Symbol AG Mortgage Investment Trust, Inc. [MITT] | | | | | | | | | ationship k all app Direc | licable) | ng Person(s) to | | | |
|--|---|--|-------------------|--|-----------------|--|--------|--|--|-----|----------|--|------------------------|--------------|--|--|---|--|--|--|
| (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/03/2023 | | | | | | | | | Office below | er (give title v) | | Other (below) | specify | |
| 245 PAR (Street) NEW YO | ORK N | Y 1 | 0167 Zip) | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | ividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secu | rities | Acq | uired, | Dis | posed of | , or E | Benefi | icially | own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securitie Disposed C | | | | | 4 and Securi Benefi | | cially I Following | Form: | rnership : Direct · Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | | | | | | v | Amount | (A) (D) | or Pri | ce | Transa | ransaction(s) Instr. 3 and 4) | | | (111511. 4) | |
| Common Stock 01/03/2 | | | | | 2023 | | | | A | | 3,752 | A | A \$5.330 | | 40,785 | | | D | | |
| 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) | Executi if any | ecution Date, iny onth/Day/Year) | | 4. Transaction Code (Instr. 8) | | rative rities ired rosed) . 3, 4 | 6. Date Exerc Expiration Da (Month/Day/N | | ite | e Amount of Securities Underlying Derivative Security (II 3 and 4) Expiration Amount of Security (II or Num or Num of Of Num of Security (II of Num of Num of Num of Security (II of Num of Nu | | Dei Sec (Ins | Price of rivative curity str. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | y C | 0. Ownership Form: Direct (D) Or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

Remarks:

/s/ Jenny B. Neslin, as Attorney-in-Fact

01/05/2023

** Signature of Reporting Person

Date

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

- * 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.

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.

^{1.} Shares were granted to the reporting person in accordance with the Issuer's independent director compensation policy. The restricted shares are fully vested, but may not be sold or transferred during the reporting person's term of service on the Issuer's Board of Directors.