FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Vashington, | D.C. 20549 |
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| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |
| hours per response: | 0.5 | | | | | | | | |

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

| 1. Name and Address of Reporting Person* FILIPPS FRANK P | | | | <u>O</u> 1 | 2. Issuer Name and Ticker or Trading Symbol Orchid Island Capital, Inc. [ORC] | | | | | | | | | ationship k all appli Directo | cable) | g Pers | son(s) to Iss 10% Ov | |
|---|--|--|---|------------|---|-------|--------|--------------------------------|--|------------------|---|--|---|-------------------------------------|---|--------------------|--|--|
| (Last) | (F | irst) | (Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 10/02/2023 | | | | | | | | Officer below) | (give title | | Other (s below) | pecify | |
| 125 VIA PALACIO | | | | 4. 1 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | EAGH | | | | | | | | | | | | X | | • | | orting Person | |
| PALM B GARDE | H H | | 33418 | L | | | | | | | | | | Persor | | | | |
| (City) (State) (Zip) | | | | - Rı | Rule 10b5-1(c) Transaction Indication | | | | | | | | | | | | | |
| | | | | | | | | icate that a tr defense con | | | | | | | on or written | plan ti | hat is intende | d to |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transar Date (Month/Da | | | | | Executio | | n Date | Code (II | Transaction Dispose Code (Instr. 5) | | ities Acquired (A) o d Of (D) (Instr. 3, 4 a | | and Securiti Benefic | | es For ially (D) Following (I) (| | r Indirect | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | | Code | v | Amount | Amount (A) or (D) | | е | Transaction(s) (Instr. 3 and 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) | 3A. Deemed Execution Date, if any (Month/Day/Year) | Code | Transaction Code (Instr. | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | nd of s ng e Securit ind 4) | S (I | erivative ecurity nstr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | ly | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | | xpiration ate | Title | Amour or Number of Shares | er | | | | | |
| Deferred Stock Units | (1) | 10/02/2023 | | A | | 2,497 | | (2) | | (2) | Common Stock | 2,497 | 7 | \$0 | 19,100 | | D | |

Explanation of Responses:

- 1. Each deferred stock unit represents a right to receive one share of the Issuer's common stock.
- 2. The deferred stock units are 100% vested but do not become payable until the earlier to occur of a change of control or the reporting person's death, disability, or separation from service as a director of the Issuer.

/s/ Frank P. Filipps

10/03/2023

** 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.