FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB APPROVAL | | | | | | | | | |
|-------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average | burden | | | | | | | | |

0.5

hours per response:

| Check this box if no longer subject to |
|--|
| Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(h) |

| Check this box to indicate that a |
|---|
| transaction was made pursuant to a |
| contract, instruction or written plan for |
| the purchase or sale of equity |
| securities of the issuer that is |
| intended to satisfy the affirmative |
| defense conditions of Rule 10b5-1(c). |
| See Instruction 10. |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* Parker Ava L | | | | | 2. Issuer Name and Ticker or Trading Symbol Orchid Island Capital, Inc. [ORC] | | | | | | | | | all application | cable) or | g Pers | son(s) to Iss | vner |
|--|--|--|---|-----------------------------------|---|--|--|--|---|------------------------------|--|---------------------------------------|--|---|--|--|---|---|
| (Last) (First) (Middle) 10589 VERSAILLES BOULEVARD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/30/2024 | | | | | | | | | Officer below) | (give title | | Other (s below) | pecify |
| (Street) WELLIN (City) | WELLINGTON FL 33449 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | Individual or Joint/Group Filing (Check Applicable ne) Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | n |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | |
| Date | | | | Transaction ate Month/Day/Y | Execution Date, | | | Transaction Disposed Code (Instr. 5) | | ties Acquir d Of (D) (Ins | ed (A) or etr. 3, 4 a | 4 and Securiti Benefic Owned | | ies For ially (D) Following (I) (| | n: Direct r Indirect sstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Pric | Ð | Reported Transact (Instr. 3 | ction(s) | | | inisti. 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/Yea | Code | action (Instr. | n of E | | 6. Date Exercisable Expiration Date (Month/Day/Year) | | | and 7. Title and Amount of Securities Underlying Derivative Sec (Instr. 3 and 4) | | De Se (In | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | Ownersh Form: Direct (D or Indirec (I) (Instr. | Ownership | Beneficial Ownership t (Instr. 4) |
| | | | | Code | v | (A) | | Date Exercisable | | xpiration ate | Title | Amour or Number of Shares | r | | | | | |
| Deferred Stock Units | (1) | 08/30/2024 | | A | | 792 ⁽²⁾ | | (3) | | (3) | Common Stock | 792 | | \$8.28 | 55,456 | 5 | D | |

Explanation of Responses:

- 1. Each deferred stock unit represents a right to receive one share of the Issuer's common stock.
- 2. The reported shares represent deferred stock units issued in lieu of the Issuer's monthly dividend pursuant to the reporting person's election.
- 3. 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

/s/ Ava L. Parker

09/03/2024

** 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.