FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. Zi

STATEMENT	OF CHANGES	S IN BENEFICIA	AL OWNERSHIP

l	OMB APPF	ROVAL						
l	OMB Number:	3235-0287						
Estimated average burden								
ı	hours ner resnonse:	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* Haas G Hunter IV (Last) (First) (Middle) C/O BIMINI CAPITAL MANAGEMENT, INC. 3305 FLAMINGO DRIVE (Street) VERO BEACH FL 32963						2. Issuer Name and Ticker or Trading Symbol Orchid Island Capital, Inc. [ORC] 3. Date of Earliest Transaction (Month/Day/Year) 12/29/2022 4. If Amendment, Date of Original Filed (Month/Day/Year) 01/03/2023							6.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner X Officer (give title Other (specify below) Chief Financial Officer 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					ner pecify dicable
(City)	(St	ate) (2	Zip)																
		Tab	le I - Nor	n-Deriv	ative	Se	curiti	ies Acq	uired,	Dis	posed o	f, or Bei	neficia	lly (Owned				
Da					ate		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		ies Acquire Of (D) (Ins	ed (A) or tr. 3, 4 ar	ıd	5. Amoun Securities Beneficia Owned Fo Reported	Form (D) o ollowing (I) (In		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)				(
Common Stock				12/2	12/29/2022				M		812(1)	A	\$(\$0 36,		130		D	
Common Stock 1:					12/29/2022				F		241(2)	(2) D \$		(3)	35,889			D	
		Т									osed of, onvertib			y O	wned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		4. Transaction Code (Instr. 8)		n of		Exercison Dat Day/Ye		7. Title an of Securit Underlyin Derivative (Instr. 3 a	ties ig e Securit	D	. Price of lerivative ecurity nstr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	ve es ially ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisa		Expiration Date	Title	Amour or Number of Shares	r					
Performance Units	(1)	12/29/2022			M			812.35	(1)		(1)	Common Stock	812.3	5	\$ 0	14,89	5	D	

Explanation of Responses:

- 1. These shares represent 812 shares of the Company's common stock issued upon the vesting of Performance Units awarded to the Reporting Person on March 22, 2021 pursuant to the Issuer's 2012 Long Term Incentive Compensation Plan and 2020 Long Term Equity Incentive Compensation Plan. Cash was paid in lieu of issuing fractional shares based on the closing price of the Company's common stock on December 27, 2022
- 2. The Reporting Person disposed of these shares of the Company's common stock to the Issuer to satisfy the Reporting Person's tax withholding obligations in connection with the vesting of shares.
- 3. The price represents the closing price of the Company's common stock on December 27, 2022.

Remarks:

This amendment is being filed to change the reference in the footnotes from dates in September 2022 to December 2022, which were inadvertently misstated. The information presented in the tables is unaffected by this amendment.

/s/ G. Hunter Haas, IV

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.