FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 [*] BLANK STEPHEN R | | | 2. Issuer Name and Ticker or Trading Symbol <u>MFA FINANCIAL, INC.</u> [MFA] | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|----------------|----------|--|---|--|-----------------------|--|--|--|--|
| | | | | X | Director | 10% Owner | | | | |
| (Last) (First) (| | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | - | Officer (give title below) | Other (specify below) | | | | |
| C/O MFA FINAN | CIAL, INC. | | 05/04/2020 | | | | | | | |
| 350 PARK AVEN | UE, 20TH FLOOR | | | | | | | | | |
| (Street) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | idual or Joint/Group Filing (Che | eck Applicable Line) | | | | |
| NEW YORK | NY | 10022 | | X | Form filed by One Reporting Form filed by More than On | - | | | | |
| | | | | | | e Reporting Person | | | | |
| (City) | (State) | (Zip) | | | | | | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | Securities Beneficially Owned | or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|--|--|---|---|---|--|---------------|--------|----------------------------------|-------------------------------|---|
| | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock, par value \$0.01 per share | 05/04/2020 | | A | | 19,697(1) | Α | \$1.65 | 82,684 | 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 | | 3A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. 8) | | Derivative | | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | Derivative | Securities Beneficially Owned Following Reported | Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) |
|--|---|--|---|-----------------------------------|---|------------|-----|---------------------|--------------------|--|----------------------------------|------------|--|--|---------------------------------------|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |

Explanation of Responses:

1. The reported acquisition represents shares granted to the Reporting Person in lieu of cash fees payable to the Reporting Person for his service as a Director for the first calendar quarter of 2020. Pursuant to the terms of the Second Forbearance Agreement, dated as of April 27, 2020, by and among MFA Financial, Inc. (the "Company") and certain of its repurchase agreement financing counterparties, the Company is contractually prohibited from paying cash fees to its Directors for such period.

<u>/s/ Harold E. Schwartz, by power</u> 05/05/2020

** 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.