FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

Name and Address of Reporting Person*     Neslin Jenny B	2. Date of Event Requiring Staten (Month/Day/Year 04/05/2021	ent AC Mortgage In	3. Issuer Name and Ticker or Trading Symbol AG Mortgage Investment Trust, Inc. [ MITT ]				
(Last) (First) (Middle) C/O ANGELO, GORDON & CO., L.P.		Relationship of Report Issuer (Check all applicable)  Director	ting Person(s	´  F	. If Amendment, iled (Month/Day,	Date of Original /Year)	
245 PARK AVENUE, 26TH FLOOR		X Officer (give title below)	Other below)	(specify 6	6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting		
(Street) NEW YORK NY 10167	_	General Couns	el & Secreta	ary	^ Person	by More than One	
(City) (State) (Zip)							
Table I - Non-Derivative Securities Beneficially Owned							
Ta	ble I - Non-De	ivative Securities Ben	eficially O	wned			
Ta 1. Title of Security (Instr. 4)	ble I - Non-De	2. Amount of Securities Beneficially Owned (Ins	3. Own	ership 4. I Direct Owndirect	Nature of Indire vnership (Instr.		
1. Title of Security (Instr. 4)	Table II - Deriv	2. Amount of Securities Beneficially Owned (Ins	3. Own Form: I (D) or I (I) (Inst	ership Direct ondirect r. 5)			
1. Title of Security (Instr. 4)	Table II - Deriv	2. Amount of Securities Beneficially Owned (Ins 4)  ative Securities Benefi arrants, options, conve	3. Own Form: I (D) or II (I) (Inst	ership Direct ondirect r. 5)	5. Ownership		

**Explanation of Responses:** 

## Remarks:

No securities are beneficially owned.

<u>/s/ Jenny B. Neslin</u> <u>04/15/2021</u>

\*\* 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 5 (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.