## Edgar Filing: Konrad Kristopher Robert - Form 4

	stopher Robert									
Form 4										
December 0										
FORM	14 UNITED	STATES SEC	TIDITIES /	ND FY	THAT	NGE C	OMMISSION		PROVAL	
	UNITED		Vashington					OMB Number:	3235-0287	
Check th if no lon	ger							Expires:	January 31,	
subject t Section Form 4 d	16. <b>STATEN</b>	IENT OF CH		BENEFI RITIES		L OWN	NERSHIP OF	Estimated a burden hou	ours per	
Form 5 obligation may con See Instr 1(b).	Filed pure ons Section 17(a			ding Con	ipany	Act of	1935 or Section	response	0.5	
(Print or Type	Responses)									
1			2. Issuer Name <b>and</b> Ticker or Trading Symbol ANNALY CAPITAL				5. Relationship of Reporting Person(s) to Issuer			
			NALY CAPI NAGEMEN		LY]		(Check all applicable)			
(Last)	(First) (M		3. Date of Earliest Transaction (Month/Day/Year)				Director 10% Owner X Officer (give title Other (specify			
MANAGE	ALY CAPITAL MENT, INC., 121 OF THE AMERIC 2	12/0 1	6/2011				below) MD & Co-	below) -Head of Port N	Agmt	
20112 2/0	Amendment, D Month/Day/Yea	-			6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person					
NEW YOR	K, NY 10036						Form filed by M Person	lore than One Re	porting	
(City)	(State)	(Zip)	fable I - Non-l	Derivative S	Securi	ities Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		if Transacti Code	4. Securit or(A) or Dis (Instr. 3, 4	sposed	l of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
~			Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common Stock	12/06/2011		М	20,000	А	\$ 13.25	146,035	D		
Common Stock							1,648	Ι	By 401(K) plan	
Class A Preferred Stock							2,600	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

## 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)	<ul> <li>3A. Deemed</li> <li>Execution Date, if</li> <li>any</li> <li>(Month/Day/Year)</li> </ul>	4. Transactio Code (Instr. 8)	ionDeriv Secur Acqu or Di (D)	urities uired (A) isposed of r. 3, 4,	Expiration Date		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Option to purchase Common Stock (1)	\$ 17.97						08/04/2004	08/04/2013	Common Stock	20,000
Option to purchase Common Stock (1)	\$ 17.39						04/19/2005	04/19/2014	Common Stock	20,000
Option to purchase Common Stock (1)	\$ 17.07						07/07/2006	07/07/2015	Common Stock	30,000
Option to purchase Common Stock (1)	\$ 15.7						05/17/2008	05/17/2017	Common Stock	40,000
Option to purchase Common Stock (1)	\$ 16.46						05/08/2009	05/08/2018	Common Stock	53,000
Option to purchase Common Stock (1)	\$ 15.61						09/19/2009	09/19/2018	Common Stock	53,000
Option to purchase Common Stock <u>(1)</u>	\$ 13.25	12/06/2011		М		20,000	04/22/2010	04/22/2019	Common Stock	20,000

## **Reporting Owners**

Reporting Owner Name	Relationships						
L O	Director	10% Owner	Officer	Other			
Konrad Kristopher Robert C/O: ANNALY CAPITAL MAN 1211 AVENUE OF THE AMERI NEW YORK, NY 10036			MD & Co-Head of Port Mgmt				
Signatures							
/s/ Kristopher Robert Konrad	12/06/2011						
**Signature of Reporting Person	Date						
<b>Explanation of Res</b>	ponses:						
* If the form is filed by more than one	reporting person, see Ins	truction 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).

(1) Options previously granted.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.