FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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).

STATEMENT OF CHANGES IN 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

| (Print or Ty | pe Response | s) | | | | | | | | | | | | | | | |
|---|---|-----------------------------------|---------------------------|---|---|-----------------|---|---|--|--|------------------------|--|---|--|--|---------------------------------------|-------|
| 1. Name and Address of Reporting Person* KASNET STEPHEN G | | | | 2. Issuer Name and Ticker or Trading Symbol Granite Point Mortgage Trust Inc. [GPMT] | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | |
| (Last) (First) (Middle) 590 MADISON AVENUE, 38TH FLOOR | | | | 3. Date of Earliest Transaction (Month/Day/Year) 09/26/2017 | | | | | | | y/Year) | | Office | er (give title belo | ow) | Other (specify b | elow) |
| (Street) | | | | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | | h/Day/Year) | 6. Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | |
| NEW YORK, NY 10022 (City) (State) (Zip) | | | | Table I - Non-Derivative Securities Acqu | | | | | | ired, Disposed of, or Beneficially Owned | | | | | | | |
| 1.Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Ye | | Execut any | Deemed ecution Date, if | Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | of (D) | | | | 6. Ownership Form: | 7. Nature of Indirect Beneficial | | |
| | | | | (Month/Day/Year | | Year) | | ode | V | (A) or Amount (D) Price | | nd 4) | D OI (I (I (I | | Ownership (Instr. 4) | | |
| Common | n Stock | | 09/26/2017 | | | | | A | | 898 | | \$ 19.5 | 3,847 | | | D | |
| | | | Table II - 1 | | | | | t | the fo | orm di | splays a of, or Ben | curre eficial | ntly valid | OMB conf | spond unle trol numbe | | |
| | | 1 | | | | | | | | | tible secu | | | | 1 | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | | Execution Da Year) any | ite, if C | e, if Transaction Code (ear) (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | Ame Und Seco | itle and ount of derlying urities tr. 3 and | 8. Price of Derivative Security (Instr. 5) | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | Ownersh Form of Derivati Security Direct (I or Indire | Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | | Date Exer | cisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Reporting Owners

| D (O N / | Relationships | | | | | | |
|--|---------------|--------------|---------|-------|--|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | | |
| KASNET STEPHEN G 590 MADISON AVENUE 38TH FLOOR NEW YORK, NY 10022 | X | | | | | | |

Signatures

| /s/ Rebecca Sandberg, as attorney-in-fact for Stephen G. Kasnet | 09/26/2017 | |
|---|------------|--|
| **Signature of Reporting Person | Date | |

Explanation of Responses:

- * 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).
- (1) Represents a common stock award issued in connection with the reporting person's appointment as lead independent director of the Issuer's board of directors. Shares were issued under the Granite Point Mortgage Trust Inc. 2017 Equity Incentive Plan.

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.