

CHIMERA INVESTMENT CORP

Reported by **DONLIN PAUL**

FORM 5

(Annual Statement of Changes in Beneficial Ownership)

Filed 02/13/13 for the Period Ending 12/31/12

Address 520 MADISON AVENUE

32ND FLOOR

NEW YORK, NY, 10022

Telephone 212-626-2300

CIK 0001409493

Symbol CIM

SIC Code 6798 - Real Estate Investment Trusts

Industry Specialized REITs

Sector Financials

Fiscal Year 12/31

FORM 5

Reported

[] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).
[] Form 3 Holdings Reported
[] Form 4 Transactions

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

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ANNUAL 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

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1. Name and Address of Reporting Person *					2. 1	Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
DONLIN PAUL					_	CHIMERA INVESTMENT CORP							X Director			10% Owner		
(Last)	(Last) (First) (Middle)				3. S	3. Statement for Issuer's Fiscal Year Ended (MM/DD/YYYY)								Officer (give title below) Other (specify below			below)	
C/O: CHIMI	DA INV	FSTMI	TNT		(1111	1/00/1	,	12/31	1/201	2								
CORPORAT				OF														
THE AMER				01														
	(Stree		<u></u>		4. I	f Am	endmei	nt, Date Or	riginal	Filed	d (MM/DD	/YYY	Y) 6. Individual or	Joint/Gro	oup Filing	(Check App	licable Line)	
NEW VODIZ	NIX/ 100	26																
NEW YORK, NY 10036														X_Form Filed by One Reporting Person Form Filed by More than One Reporting Person				
(Cir	ty) (State	e) (Zip	2)															
(2)	-5) (~	(1	: /															
			Table 1	I - Nor	-Der	ivativ	ve Secu	rities Acq	quired,	, Disp	posed of	or E	Beneficially Owner	i				
1. Title of Security (Instr. 3)			2A. Deemed Execution Date, if any		3. Trans. Cod (Instr. 8)	or	4. Securities Acquired (A or Disposed of (D) (Instr. 3, 4 and 5)		ed (A)	5. Amount of Securities Beneficially Ov Following Reported Transaction(s) (Instr. 3 and 4)		y Owned	Ownership of Form: Be	7. Nature of Indirect Beneficial Ownership				
									Aı	mount	(A) or (D)	Price				or Indirect (I) (Instr. 4)		
Common Stock													61	7689		D		
Common Stock												20	20000 I 2008			Donlin 2008 Family		
Table I	I - Derivati	ve Securi	ties Ac	quired	l, Dis	posed	d of, or	Beneficia	ılly Ow	vned	(<i>e.g.</i> , p	uts,	calls, warrants, op	tions, cor	vertible s	ecurities))	
1. Title of Derivate Security (Instr. 3)	or Exercise Date I		3A. Dee Execution Date, if)	5. Number of Derivative Securit Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (MM/DD/YYYY)		Secur Deriv	le and Amount of rities Underlying ative Security . 3 and 4)	8. Price of Derivative Security (Instr. 5)	Derivative Securities Beneficially	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
							(A)	(D)	Date Exercis		Expiration Date	Title	Amount or Number of Shares		Owned at End of Issuer's Fiscal Year (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)		

Explanation of Responses:

Reporting Owners

Reporting Owner Name / Address	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
DONLIN PAUL C/O: CHIMERA INVESTMENT CORPORATION 1211 AVENUE OF THE AMERICAS, SUITE 2902 NEW YORK. NY 10036	X					

Signatures

/s/ Paul Donlin	2/11/2013				
**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 control number.