

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

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

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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

1. Name and Address of Reporting Person *				2. Issuer Name and Ticker or Trading Symbol							ol	5. Relationship of Reporting Person(s) to Issuer						
Deille, John Detriale					CF	CHIMERA INVESTMENT CORP [(Check all applicable)				
Reilly John Patrick						CIM								_X_ Director		109/	6 Owner	
(Last) (First) (Middle)				-	3. Date of Earliest Transaction (MM/DD/YYYY)								Officer (give title below) Other (specify below)					
C/O: CHIMERA INVESTMENT CORPORATION, 520 MADISON					6/10/2021													
AVENUE, 32ND FLOOR (Street)				4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)							6. Individual or Joint/Group Filing (Check Applicable Line)						
NEW YORK, NY 10022 (City) (State) (Zip)				The second secon								_X _ Form filed by One Reporting Person Form filed by More than One Reporting Person						
			Table l	- Non-	Deri	ivati	ve Secu	rities Ac	quire	ed, Di	sposed o	f, or	Bene	eficially Owne	d			
1.Title of Security (Instr. 3) 2. Trans. D				2A. D Execu Date,	tion	3. Trans. Co (Instr. 8)	de	or Disp	4. Securities Acquired or Disposed of (D) (Instr. 3, 4 and 5)		Fo	llowing Reported Transaction(s) Ownership of Form: Be Direct (D) Ownership of Ownership of Be Direct (D)		Beneficial				
						Code	V	Amou	(A) or (D)	Pri	ice				or Indirect (I) (Instr.	Indirect (Instr. 4) (Instr. 4)		
Common Stock 6/10/202			21	A 8490 (1) A 80 (2) 119088					D									
	Tab	ole II - Dei	rivative	Securit	ies I	Bene	ficially	Owned (e.g.,	puts,	calls, wa	ırran	its, o	ptions, conver	tible secu	urities)		
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deen Execution Date, if a	n (Inst			e 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Der			Secur Deriv	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security (Instr. 5)	derivative Securities Beneficially Owned	Ownership Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code		V	(A)	(D)	Date Exerc	cisable	Expiration Date	Title	Amo	ount or Number of es		Transaction(s)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

- (1) Represents shares of Chimera common stock underlying restricted stock units ("RSUs"). The RSUs are scheduled to vest on the earlier of (1) the first anniversary of the grant date, June 10, 2022, or (2) the date of the Company's next annual stockholder's meeting, and shall be settled 100% in shares of Chimera common stock. The reporting person does not intend to report the vesting of the RSUs nor the delivery of the shares of common stock.
- (2) Each RSU has the economic equivalent of one share of Chimera common stock.

Reporting Owners

Reporting Owners						
Reporting Owner Name / Address		Relationships				
Reporting Owner Name / Address	Director 10% Owner Office		Officer	Other		
Reilly John Patrick						
C/O: CHIMERA INVESTMENT CORPORATION	X					
520 MADISON AVENUE, 32ND FLOOR	Λ					
NEW YORK, NY 10022						

Signatures

/s/ John P. Reilly 6/14/2021

**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.