

CHIMERA INVESTMENT CORP

Reported by YARLAGADDA CHOUDHARY

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 02/19/20 for the Period Ending 02/16/20

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



[] 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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Yarlagadda Choudhary						CHIMERA INVESTMENT CORP [CIM]								Director		10%	Owner	
(Last)	(Last) (First) (Middle)				3. I	3. Date of Earliest Transaction (MM/DD/YYYY)								_X_ Officer (give title below) Other (specify below) Chief Operating Officer				
C/O: CHIMERA INVESTMENT CORPORATION, 520 MADISON						2/16/2020												
AVENUE, 3																		
(Street)				4. I	4. If Amendment, Date Original Filed (MM/DD/YYYY)							YY) 6.	6. Individual or Joint/Group Filing (Check Applicable Line)					
NEW YORK, NY 10022 (City) (State) (Zip)												_2	X_Form filed by One Reporting Person Form filed by More than One Reporting Person					
			Table	I - Non	-Der	ivati	ve Seci	ırities Ac	quire	ed, Dis	posed o	f, or	Benef	icially Own	ed			
1. Title of Security (Instr. 3)			2. Trans.		2A. Deemed Execution Date, if any		3. Trans. Co (Instr. 8)	de 4. Securities Acquor Disposed of (D (Instr. 3, 4 and 5)			Follo	mount of Secur owing Reported r. 3 and 4)	ties Beneficially Owned Transaction(s)		Form:	7. Nature of Indirect Beneficial Ownership		
								Code	V	Amoun	(A) or (D)	Prio	ce					(Instr. 4)
Common Stock 2/16				2/16/20	20			A ⁽¹⁾		81236	A	\$0 <u>(</u>	<u>(2)</u>	553988 ⁽³⁾			D	
Common Stock													325687			I	By Spouse (4)	
	Tab	le II - Dei	rivative	e Securi	ties l	Bene	eficially	Owned (e.g.,	puts, c	alls, wa	rran	ıts, opt	tions, conve	ertible sec	urities)		
Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	e	Execution			Acquire Dispose		e Securities (A) or	6. Date Exercisable and Expiration Date			7. Title and A Securities Uperivative S (Instr. 3 and		nderlying Derivative ecurity Security		Securities Beneficially Owned	Form of Derivative Security:	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	ode	V	(A)	(D)	Date Exer	cisable I	Expiration Date		Amoun Shares	t or Number of		Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	

Explanation of Responses:

- (1) Represents shares of Chimera common stock underlying performance share units ("PSUs"), and accrued DERs, that vested on February 16, 2020.
- (2) Each PSU has the economic equivalent of one share of Chimera common stock.
- (3) Dividend equivalent rights ("DERs") issued on PSUs and restricted stock units ("RSUs") are included in the reporting person's common stock holding balance. Each DER is the economic equivalent of one share of Chimera common stock.
- (4) The reporting person disclaims beneficial ownership of these shares and this report shall not be deemed an admission that the reporting person is the beneficial owner of these securities for purposes of Section 16 or for any other purpose.

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Yarlagadda Choudhary C/O: CHIMERA INVESTMENT CORPORATION 520 MADISON AVENUE, 32ND FLOOR NEW YORK, NY 10022			Chief Operating Officer				

Signatures

/s/ Choudhary Yarlagadda 2/19/2020

**Signature of Reporting Person Date

- * 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.