FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person Kardis Phillip John II					2. Issuer Name and Ticker or Trading Symbol CHIMERA INVESTMENT CORP [CIM]										Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Own				/ner	
(Last)	(First)	(Mi	ddle)			3. Date of Earliest Transaction (Month/Day/Year) 01/01/2022								X	Officer (g below)			Other (s below)		
C/O: CHIMERA INVESTMENT CORPORATION															Chief Legal Officer					
630 FIFTH AVENUE, SUITE 2400					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street)													^	Form filed by More than One Reporting Person				g Person		
NEW YORK	NY	10	111																	
(City)	(State)	(Zi _l	o)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date					e nth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a				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		(A) or (D)	Price	(Instr. 3 and				(111301.4)		
Common Stock 01/0						2			A ⁽¹⁾		32,347 ⁽²⁾ A		\$0 ⁽³⁾	262,747(4)			D			
	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)	rivative Conversion Date Execution Date,			c	Code (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisabl Expiration Date (Month/Day/Year)		Securities Under		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti	e s lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				c	Code	v	(A)	(D)	Date Exercisable		Expiration Date	or Nur		Amount or Number of Shares	(Instr. 4)		On(3)			

Explanation of Responses:

- 1. Represents shares of Chimera common stock underlying restricted stock units ("RSUs"). The RSUs are scheduled to vest one-third per year on the first, second and third anniversaries of the grant date 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. The reporting person elected to defer share settlement until separation of service (such deferred share units are herein referred to as "DSUs").
- 3. Each RSU has the economic equivalent of one share of Chimera common stock.
- 4. Dividend equivalent rights ("DERs') issued on RSUs and DSUs are included in the reporting person's common stock holding balance. Each DER is the economic equivalent of one share of Chimera common stock.

/s/ Phillip J. Kardis II 01/04/2022

** Signature of Reporting Person Da

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 Number.