SEC Form 4

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

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 * Yarlagadda Choudhary						2. Issuer Name and Ticker or Trading Symbol CHIMERA INVESTMENT CORP [CIM]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 02/04/2022									Officer (g below)		iof Or	Other (specify below)		
C/O: CHIMERA INVESTMENT CORPORATION 630 FIFTH AVENUE, SUITE 2400						4 If Amendment Date of Ocivinal Filed (Manth/Dau/March)								6 Indi	Pres. and Chief Oper. Officer 6. Individual or Joint/Group Filing (Check Applicable Line)					
						4. If Amendment, Date of Original Filed (Month/Day/Year)								X	,					
(Street) NEW YORK NY 10111															Form file	d by More	than C	one Reportir	g Person	
(City)	(State)	(Zi	(Zip)																	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)							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 ar) or	d 5) 5. Amount Securities Beneficially Following F		Form	nership : Direct (D) lirect (I) . 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount		(A) or (D)	Price	(Instr. 3 and 4)				(Instr. 4)		
Common Stock 02/04					04/202	4/2022			A ⁽¹⁾		40,347 ⁽²⁾		Α	\$ <mark>0</mark>	1,353,573 ⁽³⁾			D		
Common Stock													366,287			I	By Spouse ⁽⁴⁾			
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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date,		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerci Expiration Da (Month/Day/Y		e Securities Underl		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Co		v	(A)	(D)	Date Exercis	able	Expiration Date	or Nu		Amount or Number of Shares		(Instr. 4)				

Explanation of Responses:

1. Represents shares of Chimera common stock underlying performance share units ("PSUs"), and accrued DERs, that vested on February 4, 2022.

2. Each PSU has the economic equivalent of one share of Chimera common stock. The reporting person elected to defer share settlement until separation of service.

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.



** Signature of Reporting Person

02/08/2022

on 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 Number.