FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

	OMB APPROVAL										
	OMB Number:	3235-0287									
	Estimated average burden										
l	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 Addr Thakkar Su	2. Issuer Name and Ticker or Trading Symbol CHIMERA INVESTMENT CORP [CIM]									all applicab Director	le)	Person(s) to Issuer							
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year) 12/15/2022								Officer (g below)			Other (s below)	·
C/O: CHIMEF	RA INVEST										Co-Chief Investment Officer								
630 FIFTH AVENUE, SUITE 2400							4. If Amendment, Date of Original Filed (Month/Day/Year)								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 10111																			
(City)	(State)	(Zi _l	o)																
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date					nsaction 2A. Deemed Execution Date, if any (Month/Day/Year)		Execution Date, if any		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of 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				(111341.4)		
Common Stoc	15/2022		F		847(1)		D	\$6.29	6,20	1(2)	(2) 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)	Instr. 3) or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		e Secui ar) Deriv		tle and Ai urities Un vative Se tr. 3 and 4	derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transaction	e S Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				C	Code V		(A)	(D)			Expiration Date	or Nur		Amount or Number of Shares		(Instr. 4)	Oil(S)		

Explanation of Responses:

- 1. Shares reported were withheld for payment of taxes associated with the vesting of prior grants of RSUs.
- 2. Includes shares of the common stock of Chimera Investment Corporation (the "Chimera common stock") underlying restricted stock units ("RSUs"). Each RSU has the economic equivalent of one share of Chimera common stock. 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. Dividend equivalent rights ("DERs") issued on 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.

/s/ Sudhanshu Thakkar 12/19/2022

** 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 Number.