FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
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INITIAL STATEMENT OF 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

State		Date of Event Reatement (Month/ 15/2007	_' ~." \ [3. Issuer Name and Ticker or Trading Symbol CHIMERA INVESTMENT CORP [CIM]							
(Last) 1211 AVENUE SUITE 2902 (Street) NEW YORK (City)	(First) E OF THE AME NY (State)	(Middle) ERICAS 10036 (Zip)				ionship of Reporting Person(s all applicable) Director Officer (give title below)	s) to Issuer 10% Owne Other (spe below)		(Mont	th/Day/Year) dividual or Joint/cable Line) Form filed by	de of Original Filed Group Filing (Check of One Reporting Person of More than One Reporting
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)					nt of Securities Illy Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Comon Stock						0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration		Deriv	le and Amount of Securities ative Security (Instr. 4)	Amount or Number	4. Conver or Exer Price o Derivat Securit	rsion rcise of tive	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
		Exercisable	Date	Title		of Shares	•				

Explanation of Responses:

/s/ Paul A. Keenan

11/20/2007

** Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (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).