UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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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 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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person * DONLIN PAUL				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) C/O: CHIMERA INVESTMENT CORPORATION, 1211 AVENUE OF THE AMERICAS			3. Date of Earliest Transaction (Month/Day/Year) 05/29/2015						Office	r (give title belo	w)	Other	(specify belo	ow)				
(Street) NEW YORK, NY 10036				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by More than One Reporting Person Form filed by More than One Reporting Person								
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned								
(Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea			if Code (Instr. 8)				Disposed	of (D) Benefic Reporte		mount of Securities ficially Owned Following orted Transaction(s) r. 3 and 4)		Forn	nership of B	7. Nature of Indirect Beneficial Ownership	
				(11211				ode	V	Amoun	` ′	or			` ′		nstr. 4)	
Common Stock 05/29/2015			05/29/2015				J	(1)	V	0 (1)	A (1)	(1)	137,068			D	D	
Common Stock 05/2		05/29/2015				J ⁽	(1)	V	0 (1)	A (1)	(1)	4,000		I	E 2 F	By - Donlin 2008 Family Trust		
Common Stock 05/29/2015		05/29/2015				J ⁽	(1)	V	0 (1)	A (1)	(1)	40,000			I	E F	by - Donlin inancial LC (2)	
Reminder: 1	Report on a s	separate line fo	r each class of secur	ities be	eneficia	lly o	wned o		Pers cont	ons wh ained in	o respo	rm are	e not requ	ction of inf ired to res OMB cont	pond unl		SEC 14	174 (9-02)
			Table II - I								of, or Ber tible secu							
Derivative Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/\footnote{\text{Month/Day/\footnote{\text{V}}}	Year) Execution Da	4. Transaction Code Year) (Instr. 8))	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Am Und Sec	Title and ount of derlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	ly I i i i i i i i i i i i i i i i i i i	Security: Direct (D) or Indirec	Beneficia Ownershi (Instr. 4)	
					Code	V	(A)	(D)	Date Exer	cisable	Expiratio Date	n Title	Amount or Number of Shares					
Range	ting ()	wnore																

Reporting Owners

	Relationships					
	Director 10% Officer Oth					
Reporting Owner Name / Address						

DONLIN PAUL C/O: CHIMERA INVESTMENT CORPORATION 1211 AVENUE OF THE AMERICAS NEW YORK, NY 10036	X				
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Signatures

/s/ Paul Donlin	05/29/2015
***Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) This report is being filed voluntarily to report adjustments to the total amount of securities beneficially owned by the Reporting Person due to the 1-for-5 reverse stock split of Chimera Investment Corporation effective as of April 6, 2015.
- (2) Mr. Donlin is the managing member of Donlin Financial LLC and retains a 2% ownership interest. The remaining interests are owned by a grantor trust for the benefit of his children.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.