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

Name and Address of Reporting Person* MARRIA MOHIT						2. Issuer Name and Ticker or Trading Symbol CHIMERA INVESTMENT CORP [CIM]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) C/O: CHIMEF	(First)	(Mi	ddle)			3. Date of Earliest Transaction (Month/Day/Year) 01/02/2019									Officer (give title Other (specify below) below) Chief Investment Officer					
520 MADISON AVENUE, 32ND FLOOR					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) NEW YORK	NY	10	022												Form filed by More than One Reporting Person				g Person	
(City)	(State)	(Zi	o)																	
		Та	ble I - Nor	n-Der	ivativ	e Se	ecuritie	s Acqı	uired, [Disp	osed of,	or E	Benefi	cially Ow	/ned					
Date						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			A) or , 4 and 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	Amount (A) or (D)		Price	(Instr. 3 an				(111501.4)		
Common Stock 01/0.)2/2019				A ⁽¹⁾ 2		27,137 ⁽²⁾ A		\$0 ⁽³⁾	184,209(4)		D				
Common Stock													29,236			1	By 401(k) Plan			
8.00% Series A Cumulative Redeemable Preferred Stock														3,000				By Spouse		
	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)	ivative Conversion Date Execution I urity (Instr. 3) or Exercise (Month/Day/Year) if any		3A. Deemed Execution Da if any (Month/Day/\)	ate, Transaction Code (Instr.			5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Year		e Securities Underly		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	tive ties cially I ing ted	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title		Amount or Number of Shares		Transaction(s) (Instr. 4)				

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.
- 3. Each RSU has the economic equivalent of one share of Chimera common stock.
- 4. Dividend equivalent rights issued on RSUs are included in the reporting person's common stock holding balance. Each dividend equivalent right is the economic equivalent of one share of Chimera common stock.

/s/ Mohit Marria

01/03/2019

** 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.