SEC	Form	4
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the

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

affirmative defens 10b5-1(c). See In	se conditions of Rule struction 10.			
1. Name and Address of Reporting Person* STILL DEBRA			2. Issuer Name and Ticker or Trading Symbol <u>CHIMERA INVESTMENT CORP</u> [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) 06/05/2024	X Director 10% Owner Officer (give title Other (specify below) below)
C/O: CHIMERA INVESTMENT CORPORATION 630 FIFTH AVENUE, SUITE 2400			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person
(Street)				Form filed by More than One Reporting Person
NEW YORK	NY	10111		
(City)	(State)	(Zip)		
		Table I - Non-D	Derivative Securities Acquired, Disposed of, or Benefi	icially Owned

4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) 6. Ownership 7. Nature of 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 5. Amount of Date Execution Date, Transaction Securities Form: Direct (D) Indirect (Month/Dav/Year) if anv Code (Instr. Beneficially Owned or Indirect (I) Beneficial (Month/Day/Year) 8) Following Reported (Instr. 4) Ownership Transaction(s) (Instr. 4) (A) or (D) (Instr. 3 and 4) Code v Amount Price Common Stock 06/05/2024 10,231(1) **\$0**⁽²⁾ 37,452(3) D Α A

> 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	ise (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (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)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported	Ownership Form:	Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	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 on the earlier of (1) the first anniversary of the grant date, June 5, 2025, or (2) the date of the next annual stockholders meeting of the Company 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. Each RSU has the economic equivalent of one share of Chimera common stock.

3. The total share numbers reflect a 1-for-3 reverse stock split that became effective following the close of business on May 21, 2024.

Remarks:

/s/ Debra W. Still

** Signature of Reporting Person

06/05/2024 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.