FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-028								
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	Check this box if no longer subject to
٦	Section 16. Form 4 or Form 5 obligations may continue. See
J	obligations may continue. See
	Instruction 1(b)

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 or	nd Address of	Penarting Person*			_		. ,				Svmbol		. 10 .0		5. Re	lationshin	of Reporting	a Pers	son(s) to Iss	suer		
1. Name and Address of Reporting Person* <u>Lown Jeffrey B</u>					<u>Ct</u>	2. Issuer Name and Ticker or Trading Symbol Cherry Hill Mortgage Investment Corp [Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(1) (First) (4 Fiddle)					. CH	СНМІ]									X	Office	(give title		Other (s	specify		
(Last) (First) (Middle) 301 HARPER DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 06/19/2017									President							
SUITE 1	10																		<i>(</i> 2)			
(Street)				- 4. lt	If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person							
MOORE	STOWN N	IJ	08057												X	='	,		orting Perso n One Repo			
(City)	(S	tate)	(Zip)			Person																
		Tab	le I - Nor	n-Deriv	ative	Sec	curities	s Ac	quire	d, Di	spose	o b	f, or Be	nefic	ially	/ Owned	t					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						ar) E	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.		on Dispo					Securition Benefici	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Cod	e V	Amou	ınt	(A) o (D)	r Pri	ce	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
		Т	able II - I										or Ben ole secu			Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transaction Code (Instr. 3)				6. Date Expirat (Month		and 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		f g Securi	E	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
					Code	V	(A)	(D)	Date Exercis	able	Expiration Date		Title	Amou or Numb of Share	er							
LTP Units	(1)	06/19/2017			A		7,500		(1)		(1)		Common Stock	7,50	0	(1)	37,250		D			

Explanation of Responses:

1. Represents units of limited partnership interests ("LTIP Units") in Cherry Hill Operating Partnership, L.P. (the "Operating Partnership") of which the Issuer is the general partner. Vested LTIP Units, upon achieving parity with the common units of limited partnership interest in the Operating Partnership pursuant to the terms of the partnership agreement, may be exchanged at any time for cash (as described in the partnership agreement) or, at the election of the Issuer, for shares of common stock on a one-for-one basis. The LTIP Units will vest and become nonforfeitable ratably over the three-year period beginning on the date of grant, subject to the reporting person's continued service to the Issuer, the external manager, Cherry Hill Mortgage Management, LLC or its affiliate and have no expiration date.

/s/ Jeffrey Lown II

06/19/2017

** 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.