FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

washington,	D.C. 20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
1	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).

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* Lown Jeffrey B				2. Issuer Name and Ticker or Trading Symbol Cherry Hill Mortgage Investment Corp					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
				CHMI]					X	Director		10% O	wner		
(Last)	(F	irst)	(Middle)			1					X	Officer (below)	give title	Other (: below)	specify
301 HARPER DRIVE SUITE 110				3. Date of Earliest Transaction (Month/Day/Year) 07/20/2017					President						
(Charle)				4	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) MOORESTOWN NJ 08057								X							
									Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)												
		Та	ble I - Non-I	Derivati	ve Se	ecuritie	es Acq	uired, Dis	posed of	, or Ben	eficially	Owned			
Date		. Transacti ate Month/Day	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Beneficial Owned Fo	Form ly (D) or	rm: Direct or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership				
					Code V	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	on(s) nd 4)		(Instr. 4)			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
							11. Nature								
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Code (Instr.		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 Transaction(s)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
LTIP Units	(1)	07/20/2017		С			20,417	(1)	(1)	Common Stock	20,417	(1)	16,831	D	
Common Units	(2)	07/20/2017		С		20,417		(2)	(2)	Common	20,417	(2)	20,417	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 Common Units (as described in the partnership agreement) on a one-for-one basis. The LTIP Units have no expiration date.
- 2. Represents common units of limited partnership interest ("Common Units") in the Operating Partnership issued on exchange of vested LTIP Units. All rights are identical to those of the LTIP Units except that Common Units may be redeemed for cash or sold to the Issuer for shares of common stock on a one-for-one basis. There is no expiration date for the Common Units or the right to redeem or exchange.

/s/ Jeffrey Lown II

07/21/2017

** 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.