

(Print or Type Responses)

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

OMB APPROVAL						
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INITIAL STATEMENT OF 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

Name and Address of Reporting Person * STOLT JEFFREY			2. Date of Event Requiring Statement (Month/Day/Year) 10/28/2009			_	3. Issuer Name and Ticker or Trading Symbol Two Harbors Investment Corp. [TWO]						
601 CARLSON I	PARKWAY, SU	(Middle) UITE 330	10/28/2009				4. Relationship of Reporting Person(s) to Issuer (Check all applicable)				5. If Amendment, Date Original Filed(Month/Day/Year)		
MINNETONKA	(Street) , MN 55305					Director X Officer (give ti			Other (spe	ecify A	6. Individual or Joint/Group Filing(Check Applicable Line) X. Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(State)	(Zip)	Table I - N			VP, CFO & Treasurer - Non-Derivative Securities Benef							
(Instr. 4)			Beneficially Owned (Instr. 4)			Fo (D (I)	Ownership orm: Direct O) or Indirect) nstr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)					
Common stock, par value \$0.01 per share				2	2,000				D				
Reminder: Report on	Persons w unless the	vho respond e form displa	to the co	ollection of	of info	ormation B contro	contained in			·	·	oond 	C 1473 (7-02)
1. Title of Derivative Security (Instr. 4)		and	2. Date Exercisable and Expiration Date (Month/Day/Year)				mount of Securities Perivative Security		4. Conversion or Exercise Price of Derivative	5. Owner Form of Derivativ Security:	ve	Ownership (Instr. 5)	
			Date Expiration Date Title		Title	Amount Shares	at or Number of		Security	(D) or Indirect (I) (Instr. 5)			
Panarting (Owners												

Reporting Owners

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
STOLT JEFFREY 601 CARLSON PARKWAY SUITE 330 MINNETONKA, MN 55305			VP, CFO & Treasurer				

Signatures

/s/ Jeffrey Stolt	10/26/2009
**Signature of Reporting Person	Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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.

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.