## FORM 4

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

OMB APPROVAL							
OMB Number: 3235-028							
Estimated average burden							
ours per respons	se 0.5						

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

#### STATEMENT OF CHANGES IN 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

(Print or Ty	pe Response	s)																	
1. Name and Address of Reporting Person *- SANDERS WILLIAM REID				2. Issuer Name and Ticker or Trading Symbol Two Harbors Investment Corp. [TWO]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
C/O HARBOR GLOBAL CO LTD, ONE FANEUIL HALL MARKET PLACE				3. Date of Earliest Transaction (Month/Day/Year) 05/24/2013										cer (give title be	elow)	Other (specify b	pelow)		
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)									6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
	N, MA 021														— FOIII I	ned by More in	an One Reporting r	erson	
(City	y)	(State)	(Zip	)			7	Table	I - No	on-De	erivativ	e S	Securitie	es Acqu	uired, Dis	posed of, or	Beneficially (	Owned	
1.Title of Security 2. Transaction Date (Month/Day)		y/Year)	Exec any	2A. Deemed Execution Date, if any (Month/Day/Year)	Coc (Ins	ransad le tr. 8)	etion	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)			Ownership Form:	7. Nature of Indirect Beneficial				
					(Mon	itin/Day/ Y	(ear)		ode	V	Amou	nt	(A) or (D)	Price	(Instr. 3	and 4)		Direct (D) Own or Indirect (I) (Instr. 4)	
	Common stock, par value \$0.01 per share 05/2		05/24/20	13				P		5,000	) .		§ 11.45 (1)	76,161	61		D		
Reminder:	Report on a s	separate line fo		able II -	Deri		ecuri	ities 2	Acqui	Person the	sons w tained form d Dispose	vho in disp	this fo plays a of, or Be	orm ard curre	e not req ntly vali	d OMB cor	formation espond unles atrol number	s	1474 (9-02)
1. Title of	2.	3. Transactio	n 3A. D	eemed		4.	<u> </u>	5.		•	ate Exer				tle and	8. Price of	9. Number of	10.	11. Natur
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/	Year) any		(Instr. 8)		Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)			Expiration Date nth/Day/Year)			Unde Secu	unt of erlying rities r. 3 and	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)	
						Code	V	(A)	(D)	Date Exer	cisable	Ex Da	xpiration ate	Title	Amount or Number of Shares				

### **Reporting Owners**

Donouting Owney Name / Adduces	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
SANDERS WILLIAM REID C/O HARBOR GLOBAL CO LTD ONE FANEUIL HALL MARKET PLACE BOSTON, MA 02109	X						

#### **Signatures**

/s/ W. Reid Sanders, By: Rebecca B. Sandberg, Attorney-in-Fact

05/24/2013

\*\*Signature of Reporting Person

#### **Explanation of Responses:**

- \* 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).
- (1) Per share price reflects the weighted average price paid. The shares were purchased in multiple transactions at prices ranging from \$11.40 to \$11.4793. The reporting person undertakes to provide, upon request, full information regarding the shares purchased in such transactions.

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.