

(Print or Type Responses)

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

OMB APPR	OVAL
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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

1. Name and Address of Reporting Person *- RISKEY MARY KATHRYN		2. Date of Event Requiring Statement (Month/Day/Year)			3. Issuer Name and Ticker or Trading Symbol TWO HARBORS INVESTMENT CORP. [TWO]				
590 MADISON AVENUE, 36TH FLOO	OR 01/01/2016			4. Relationship of Reportin Issuer				5. If Amendment, Date Original Filed(Month/Day/Year)	
NEW YORK, NY 10022					(Check all applicable) Director X below) Chief Accounting Officer			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 - Non-Derivative Securities Beneficially Owned						Owned	
(Instr. 4)			Beneficially Owned (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common stock, par value \$0.01 per share	·e	27	7,058			D			
Reminder: Report on a separate line for each clas Persons who responses the form dis Table II - Deriva	end to the c plays a cur	ollection o	of info d OM	rmation cor B control nu	itained in th		required to response		
1. Title of Derivative Security (Instr. 4)	and Expirat	nd Expiration Date U		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security: Direct	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
	Date Exercisable	Expiration Date	Title	Amount or N Shares	umber of	Security	(D) or Indirect (I) (Instr. 5)		
Reporting Owners									

Reporting Owner Name / Address		Relationships			
•	reporting Owner Name / Address		10% Owner	Officer	Other
3	RISKEY MARY KATHRYN 590 MADISON AVENUE 6TH FLOOR NEW YORK, NY 10022			Chief Accounting Officer	

Signatures

/s/ Mary K. Riskey	01/05/2016	
**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.