FORM 4

Check this box if no					
longer subject to					
Section 16. Form 4 or					
Form 5 obligations					
may continue. See					
Instruction 1(b).					

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

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 Type Responses)										
1. Name and Address of Reporting Po ROTH WILLIAM	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 Director10% Owner X Officer (give title below)Other (specify below)			
(Last) (First) TWO HARBORS INVESTMI LEXINGTON AVENUE, SUI	,	CORP., 575 $\begin{vmatrix} 0.1/28/2019 \end{vmatrix}$					Chief Investment	Officer		
(Street) NEW YORK, NY 10022	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			
(City) (State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)		(A) or Disposed of (D)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D)	Ownershipof IndirectForm:BeneficialDirect (D)Ownership
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
Common stock, par value \$0.01 per share	01/28/2019		А		20,833 (1)	А	\$ 14.4	749,537	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information SEC contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1474 (9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exercisable		7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transact	ion	Num	ber	and Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year)		Underlying		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	vative	ive		Securities (Inst		(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative					Secur	curities		(Instr. 3 and			Owned	Security:	(Instr. 4)	
	Security					Acqu	iired		4)	4)		Following	Direct (D)		
						(A) or					Reported	or Indirect			
					Disposed							Transaction(s)	< / .		
					of (D)							(Instr. 4)	(Instr. 4)		
						(Instr. 3,									
						4, and	4, and 5)								
											Amount				
								Date	E-minution		or				
								Exercisable Date	Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				

Reporting Owners

Departing Orynon Name / Adduss	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
ROTH WILLIAM TWO HARBORS INVESTMENT CORP. 575 LEXINGTON AVENUE, SUITE 2930 NEW YORK, NY 10022	Х		Chief Investment Officer					

Signatures

/s/ William Roth	01/29/2019
**Signature of Reporting Person	Date

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) Represents a restricted stock award issued under Two Harbors Investment Corp.'s Second Restated 2009 Equity Incentive Plan. This award vests in three equal annual installments commencing on the first anniversary of the grant date.

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.