# FORM 4

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

OMB APPROVAL

OMB Number: 3235-0287
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).

#### 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 Responses	5)															
1. Name and Address of Reporting Person * STOLT JEFFREY					2. Issuer Name and Ticker or Trading Symbol Two Harbors Investment Corp. [TWO]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X Officer (give title below) Vice President,CFO & Treasurer					
(Last) (First) (Middle) TWO HARBORS INVESTMENT CORP., 601 CARLSON PARKWAY, SUITE 330					3. Date of Earliest Transaction (Month/Day/Year) 05/11/2010												
(Street) MINNETONKA, MN 55305				4. I	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line)						
(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/Ye	Ex- n/Day/Year) any		2A. Deemed Execution Date, if		(Instr. 8)		(A) or Dispo (Instr. 3, 4 a		5. Amo Benefic Reporte (Instr. 3		ount of Securities sially Owned Following ed Transaction(s)		6. Ownership Form:	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
							(	Code	V	Amour	(A) or (D)	Price				(Instr. 4)	
Common \$0.01 per	n Stock, par r share	r value	05/11/2010					A		1,000	A	\$ 8.80	10,000	•		D	
			Table					Acquir	conta the fo	ined i orm di sposed	n this fo	rm are curre neficia	e not req intly vali	uired to re d OMB cor	nformation espond unles ntrol number.	s	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	****		ed Date, if	e, if 4. Transaction Code		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Tit Amo Unde Secu	tle and ount of erlying	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
									Date	sable ]	Expiration	Title	Amount or Number				

## **Reporting Owners**

	Depositing Owney Name / Adduses		Relationships						
Reporting Owner Name / Address		Director	10% Owner	Officer	Other				
	STOLT JEFFREY TWO HARBORS INVESTMENT CORP. 601 CARLSON PARKWAY, SUITE 330 MINNETONKA, MN 55305			Vice President,CFO & Treasurer					

## **Signatures**

/s/ Jeffrey Stolt	05/12/2010
**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).

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.