INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person <u>*</u> ROTH WILLIAM			2. Date of Event RequiringStatement(Month/Day/Year)		3. Issuer Name and Ticker or Trading Symbol Two Harbors Investment Corp. [TWO]				
(Last)	(First)	(Middle)	10/28/2009		4. Relationship of Reporting Person(s) to Issuer			5. If Amendment, Date Original Filed(Month/Day/Year)	
601 CARLSON PARKWAY, SUITE 330			(Check all ap			k all applicable	cable)		
(Street) MINNETONKA, MN 55305				Director 10% Owner X_Officer Other (give title below) (specify below) VP, Co-Chief Investment Off		 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 - I	Non-Deriva	tive Securit	ies Be	eneficially Owned	
1.Title of Secu (Instr. 4)	urity			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		ture of Indirect Beneficial ership : 5)	
Common stock, par value \$0.01 per share			er share	28,200 D		Â			
Reminder: Report on a separate line for each class of secu owned directly or indirectly.			curities benefic	ially	SEC 1473 (7-02	2)			
	inform	nation conta	ained in this	collection of form are not ne form displ	t				

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

currently valid OMB control number.

1. Title of Derivative Security 2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Title	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
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3235-0104

January 31,

2005

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Expires:

response...

Estimated average burden hours per

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
ROTH WILLIAM 601 CARLSON PARKWAY SUITE 330 MINNETONKA, MN 55305	Â	Â	VP, Co-Chief Investment Off	Â		
Signatures						
/s/ William Roth 10/26	/2009					
**Signature ofDReporting Person	ate					

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.