

## REDWOOD TRUST INC

# Reported by **KUBICEK GREG H**

## FORM 4

(Statement of Changes in Beneficial Ownership)

## Filed 07/02/24 for the Period Ending 06/28/24

Address ONE BELVEDERE PLACE

SUITE 300

MILL VALLEY, CA, 94941

Telephone (415) 380-2317

CIK 0000930236

Symbol RWT

SIC Code 6798 - Real Estate Investment Trusts

Industry Specialized REITs

Sector Financials

Fiscal Year 12/31

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

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL

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

#### 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

1. Name and Address of Reporting Person *					2. Issuer Name and Ticker or Trading Symbol								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
KUBICEK	GREG E	I		R	EI	OWOOI	TR	US	T II	NC	RWT	]		,			
(Las	t) (Fir	st) (M	fiddle)	3.	3. Date of Earliest Transaction (MM/DD/YYYY)							X_ Director10% Owner Officer (give title below) Other (specify below)					
1 BELVEDERE PLACE, SUITE 300						6/28/2024											
	(St	reet)		4.	If A	Amendme	nt, Dat	te O	rigina	al Fil	ed (MM/D	D/YYYY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
MILL VAL	LEY, CA	94941											X Form filed b				
(City) (State) (Zip)												Form filed by More than One Reporting Person					
			Table I	- Non-De	eriva	ative Secu	ırities	Acq	quire	d, Di	sposed o	of, or Bei	neficially Owne	d			
1. Title of Security (Instr. 3) 2. Trans. I			2. Trans. Date	Date 2A. Deemed Execution Date, if any 3. Trans. Co			or Disposed of (D)			) I	Direct (D)				Beneficial Ownership		
							Code	le	V	Amou	(A) or (D)	r Price				or Indirect (I) (Instr. 4)	(Instr. 4)
	Ta	ble II - De	rivative S	Securities	s Be	neficially	Owne	ed (a	e.g., j	puts,	calls, wa	arrants,	options, conver	tible secu	ırities)		
1. Title of Derivate Security (Instr. 3)	Conversion or Exercise Price of Derivative	3. Trans. Date	3A. Deeme Execution Date, if any	ed 4. Trans. Code (Instr. 8)	Derivative		Securities A) or f (D)		and Expiration Date So					8. Price of Derivative Security (Instr. 5)	Securities Beneficially Owned	Ownership Form of Derivative	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Security			Code	v	(A)	(D)		Date Exerc	Expiration Date		Title	Amount or Number of Shares		Following Reported Transaction(s) (Instr. 4)	or Indirect	
Deferred Stock Units	\$6.4	6/28/2024		A		10,844.	87 <sup>(1)</sup>		(	2)	<u>(3)</u>	Common Stock	10,844.87	\$0	10,844.87	D	

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

- (1) This transaction relates to the acquisition of Deferred Stock Units in accordance with the deferral election made with respect to director compensation and/or dividend equivalent rights according to the terms and conditions of the Redwood Trust Inc. Amended and Restated Executive Deferred Compensation Plan.
- (2) 100% vested at grant.
- (3) No expiration date is applicable to deferred stock units.

#### Reporting Owners

reporting owners										
Panarting Owner Name / Address	20	Relationships								
Reporting Owner Name / Addres	Director	10% Owner	Officer	Other						
KUBICEK GREG H										
1 BELVEDERE PLACE	X									
SUITE 300	Λ									
MILL VALLEY, CA 94941										

#### **Signatures**

Attorney-In-Fact:/s/Andrew P. Stone

7/2/2024

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

- \* 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.

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