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

	pe Response	s)												
1. Name and Address of Reporting Person * SIRKIS ANDREW				2. Issuer Name and Ticker or Trading Symbol REDWOOD TRUST INC [RWT]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) ONE BELVEDERE PLACE, SUITE 300				3. Date of Earliest Transaction (Month/Day/Year) 11/17/2003				X Officer (give title below) Other (specify below) Vice President						
(Street) MILL VALLEY, CA 94941				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City		(State)	(Zip)	Ta	ıble I - Nor	ı-Deri	ivative S	ecuritie	s Acqu	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any	3. Transaction Code (Instr. 8)		1		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		ies Following	6. Ownership Form:	Beneficial	
				(Month/Day/Year)	Code	V	Amount	(A) or (D)	Price	(Instr. 3 a	nd 4)		\ /	Ownership (Instr. 4)
		11/17/2003		S		2,000		\$ 57.20	1,074		I	D		
												spond unle		
				Derivative Securiti	ies Acquire	ed, Dis	sposed o	f, or Be	neficia	lly Owned	OWID COIL	trol numbe	r.	

Reporting Owners

D (1 0 N (Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
SIRKIS ANDREW ONE BELVEDERE PLACE SUITE 300 MILL VALLEY, CA 94941			Vice President			

Signatures

Andrew Sirkis	11/18/2003
**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.