# FORM 4

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

OMB APPROVAL
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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 Response	s)														
1. Name and Address of Reporting Person * MCFARLAND STUART A				2. Issuer Name and Ticker or Trading Symbol NEWCASTLE INVESTMENT CORP [NCT]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  X Director 10% Owner						
(Last) (First) (Middle) 1345 AVENUE OF THE AMERICAS, 46TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 09/03/2014						Office	r (give title belo	ow)	Other (specify b	pelow)	
(Street) NEW YORK, NY 10105				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	7)	(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)		n Date, if	f Cod (Ins	(Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	t of Securities ly Owned Following Transaction(s)		Ownership Form:	Beneficial
				(Month/D	(Month/Day/Year)		ode	V	Amoun	(A) or (D)	Price	(Instr. 3 a	nd 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
Common \$0.01 per	Stock, pa r share	r value	09/03/2014				S		6,173	D	\$ 13.5 (1)	13,038			D	
	Tepon on a	separate Inte		Derivative	Securi	ties Ac	equire	Pers cont the f	ons when ained in the constant of the constant	no responding this formal series of the seri	orm ar a curre	e not requently valid		formation spond unle trol numbe	ss	1474 (9-02)
1. Title of	2	3. Transactio		(e.g., puts,	calls, v	sarran 5.	ts, op		ate Exerc			) Fitle and	8. Price of	9. Number	of 10.	11. Natur
Derivative Security	Conversion or Exercise Price of Derivative Security	Date		tte, if Code Year) (Instr. 8)		Number of Deriv Securion Acquired (A) of Disposof (D) (Instr	Number		and Expiration Date (Month/Day/Year)		Am Und Sec	nount of derlying curities str. 3 and	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct () or Indire	Beneficia Ownershi (Instr. 4)
					de V		(D)	Date Exer		Expiration Date	on Titl	Amount or Number of Shares				

### **Reporting Owners**

٠		Relationships				
	Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
	MCFARLAND STUART A 1345 AVENUE OF THE AMERICAS, 46TH FLOOR NEW YORK, NY 10105	X				

### **Signatures**

/s/ Stuart A. McFarland	09/03/2014			
**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).
- This price is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$13.50 to \$13.5049, inclusive. The Reporting Person undertakes (1) to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in this footnote.

#### Remarks:

This report reflects the effects of the Issuer's 3-for-1 reverse stock split that occurred on August 18, 2014.

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.