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

| OMB APPROVAL | | | | | |
|--------------------|-----------|--|--|--|--|
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| Estimated average | burden | | | | |
| hours per response | 9 0.5 | | | | |

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: | ~) | | | | | | | | | | | | | | |
|---|---|---|---|---|----------------------------------|---|-------------------------|--|---|------------------|---|--|---|---|--|--|
| Name and Address of Reporting Person HESS DEBRA ANN | | | | 2. Issuer Name and Ticker or Trading Symbol NEWCASTLE INVESTMENT CORP [NCT] | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner | | | | | |
| (Last) (First) (Middle) 1251 AVENUE OF THE AMERICA 16 FLOOR | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/22/2004 | | | | | | X | X Officer (give title below) Other (specify below) Chief Financial Officer | | | | | |
| (Street) NEW YORK, NY 10020 | | | • | 4. If Amendment, Date Original Filed(Month/Day/Year) | | | | | | _X_ | 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 - Non-Derivative Securities Acqu | | | | | | s Acquired | lired, Disposed of, or Beneficially Owned | | | | | |
| 1.Title of S (Instr. 3) | / | | | 2A. Deemed Execution Date, any (Month/Day/Yea | | e, if | | (| 1. Securities Acqui A) or Disposed of Instr. 3, 4 and 5) | | of (D) Own Tran | Amount of Securities Be red Following Reported nsaction(s) str. 3 and 4) | | ed I | or Indirect | Beneficial Ownership |
| | | | | | | | Coc | de V | | (D) or | Price | | | | I) Instr. 4) | |
| | | itle of 2. 3. Transaction Date Execution Date, any or Exercise (Month/Day/Year) | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Conversion or Exercise Price of Derivative | Date | 3A. Deemed Execution Date, if | 4. Transact | s, calls 5. tion D S A (A | , war . Num | ber ive ies ed | uired, Disp , options, c | osed of, or onvertible sercisable and | Benef securit | ficially Ow | Amount ng | 8. Price of Derivative Security (Instr. 5) | 9. Number o | Owners Form of Derivati Security Direct (I or Indire | Beneficia Ownersh (Instr. 4) |
| Derivative Security | Conversion or Exercise Price of Derivative | Date | 3A. Deemed Execution Date, if any | 4. Transact | s, calls tion D S A (A D O (I an | s, war . Num f Derivat decurition acquire A) or Dispose f (D) Instr. 3 and 5) | ber ive ies ed ed 8, 4, | uired, Disp , options, c 6. Date Exe Expiration | osed of, or onvertible s ercisable and Date y/Year) | Benef securit | ficially Owities) 7. Title and of Underlying Securities | Amount ng | 8. Price of Derivative Security | 9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(| Owners: Form of Derivati Security Direct (I or Indirects) | hip of Indire Beneficia Ownersh (Instr. 4) |

| | Relationships | | | | | |
|---|---------------|--------------|-------------------------|-------|--|--|
| Reporting Owner Name / Address | Director | 10% Owner | Officer | Other | | |
| HESS DEBRA ANN 1251 AVENUE OF THE AMERICA 16 FLOOR NEW YORK, NY 10020 | | | Chief Financial Officer | | | |

Signatures

| /s/ Debra A. Hess | 11/24/2004 |
|---------------------------------|------------|
| **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).

- (1) Options assumed for no value; assigned to officer from Fortress Principal Investment Holdings LLC ("FPIH") simultaneously with the receipt by FPIH of options from the issuer.
- (2) Options were fully vested on the date of the grant thereof by issuer and become exercisable in thirty equal monthly installments beginning in the first of the month following the month in which granted.

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.