## FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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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				3. Date of Earliest Transaction (Month/Day/Year) 05/18/2007						Office	er (give title belo	ow)	Other (specify	below)	_	
(Street) NEW YORK, NY 10105				4. If Amendment, Date Original Filed(Month/Day/Year)						_X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person					
(City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
(Instr. 3)		2. Transaction Date (Month/Day/Year)		_	f Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (I (Instr. 3, 4 and 5)		of (D	Beneficia Reported	lly Owned F Transaction	of Securities V Owned Following ransaction(s)			of Indirect Beneficial	
			(Month/Day/Year)		Code	:	V Amou	(A) or (D)	Pric		r. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownershi (Instr. 4)		
Common Stock, par value \$0.01, per share		05/18/2007			J <u>(1)</u>		541	A	\$ 0 (1)	2,567	2,567		D			
			Table II - 1	Derivative Secu	ıritie	es Acqui	th	ontained ie form d	in this fo	orm a	o the collect re not requestently valid	uired to res OMB con	spond unle	ss	C 1474 (9-0)	2)
1		1	(	e.g., puts, calls	, wai	rrants, c	ptio	ons, conve	rtible secu	uritie	s)					
Security	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/	Year) Execution Da	4. Transacti Code (Instr. 8)	e, if Transaction Number of		ar (1)			Aı Uı Se	Title and mount of nderlying scurities nstr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	ship of Ind Benefitive Owne (Instr.	Beneficial Ownershij (Instr. 4)
				Code	V	(A) (D	E	Oate Exercisable	Expiration Date	on Ti	Amount or Number of Shares					

#### **Reporting Owners**

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

### **Signatures**

/s/ Stuart A. McFarland	05/18/2007
**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).
- Shares were issued to director as compensation for services provided pursuant to the terms of the issuer's Nonqualified Stock Option and Incentive Award Plan.

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.