FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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* Evanski Phillip					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) C/O FORTRESS INVESTMENT GROUP LLC, 1345 AVENUE OF THE AMERICAS, 46TH FLOOR				3. Date of Earliest Transaction (Month/Day/Year) 09/22/2011							/Year)	X Offic	er (give title bele Chief	``Investment (ther (specify l Officer	pelow)		
(Street) NEW YORK, NY 10105				4. If Amendment, Date Original Filed(Month/Day/Year)							/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) (State) (Zip)				(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
1.Title of Security (Instr. 3)		Date		Execu			Cod (Ins	ransa e tr. 8)	v	(A) or I	Disposed, 4 and 5	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		following (s)	Ownership Form: Direct (D) or Indirect (I) Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock, par value \$0.01 per share			09/22	2/2011					P		30,000	A	\$ 4.55	36,500			D	
Kellillider.	Report on a s	separate line fo	or each c	Table II - I	Deriva	ntive Sec	curit	ies Ac	quire	Personta conta the fo	ons wh ained ir orm dis	o respo this for plays a	rm are curre	e not requently valid	OMB conf	formation spond unles trol number	s	1474 (9-02)
1. Title of Derivative Security (Instr. 3)		3. Transaction Date (Month/Day/	Execution any	A. Deemed execution Dat	e, if	4. Transact Code	tion	5.		and Expiration Date (Month/Day/Year)		7. T Am Und Sec	Citle and count of derlying urities str. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form of Derivat: Security Direct (or Indire	Beneficia Ownersh (Instr. 4)	
						Code	V	(A)	(D)	Date Exer		Expiratio Date	n Titl	Amount or e Number of Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Evanski Phillip C/O FORTRESS INVESTMENT GROUP LLC 1345 AVENUE OF THE AMERICAS, 46TH FLOOR NEW YORK, NY 10105			Chief Investment Officer				

Signatures

/s/ Phillip Evanski	09/26/2011
**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.