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)															
Name and Address of Reporting Person * Sigman Brian Chad					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 Officer (give title below) Other (specify below) Chief Financial Officer				
(Street) NEW YORK, NY 10105				4. If Amendment, Date Original Filed(Month/Day/Year)							n/Day/Year)	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)			Ta	able I	- Nor	ı-Der	ivative S	Securities	Acqui	ired, Disp	osed of, or I	Beneficially (Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	Execu	Deemed cution Date, if nth/Day/Year)	(Instr. 8)		(A) or D		rities Acquired Disposed of (D) 3, 4 and 5)		5. Amount of Securiti Beneficially Owned F Reported Transaction (Instr. 3 and 4)		ollowing O (s) F	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership		
			(Wolf	(Wolldin Bay) Tea			ode	V	Amour	(A) or (D)	Price	(mon. 5 u			or Indirect (I) (Instr. 4)		
Common Stock, par value \$0.01 per share		09/22/2011				P		25,00	111/	\$ 4.55	25,000	000		D			
Reminder:	Report on a s	separate line fo	or each class of secu Table II -	Deriva	ntive Sec	curit	ies Ac	equire	Pers conta the fe	ons whained in orm dis	no respon n this for splays a	m are curre: eficial	not requesting ntly valid		ormation spond unlead trol number	ss	1474 (9-02)
1. Title of	2.	3. Transactio			uts, call		arran 5.	ts, op	1		tible secu		itle and	9 Dries of	9. Number o	f 10.	11. Natu
Derivative Security (Instr. 3)		Date	Execution Da (Year) any	Transac Code Year) (Instr. 8	tion			and Expiration Date (Month/Day/Year)		Amo Und Secu	ount of erlying arities tr. 3 and		Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o Derivat Security Direct (or Indir	ship of Indire f Benefici ive Ownersl (Instr. 4)		
					Code	V	(A)	(D)	Date Exer		Expiration Date	1 Title	Amount or Number of Shares				

Reporting Owners

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

Signatures

/s/ Brian Chad Sigman	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.