(Print or Type Responses)

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

OMB APPROVAL						
OMB Number:	3235-0287					
Estimated average burden						
hours per response	0.5					

5. Relationship of Reporting Person(s) to Issuer

longer subject to Section 16. Form 4 or Instruction 1(b).

1. Name and Address of Reporting Person\*

#### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Form 5 obligations may Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

Sigman I	NE	NEWCASTLE INVESTMENT CORP [NCT]							Director 10% Owner							
(Last) (First) (Middle) C/O NEWCASTLE INVESTMENT CORP., 1345 AVENUE OF THE AMERICAS					3. Date of Earliest Transaction (Month/Day/Year) 05/30/2012						X	Officer (give to		Other (s	specify below)	
(Street) NEW YORK, NY 10105				4. If .	4. If Amendment, Date Original Filed(Month/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				
(Ci	ty)	(State)	(Zip)				Tal	ble I - Non-De	rivative	Securities	Acquired,	Disposed of	, or Benefic	ially Owned		
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y	Execu ear) any		Deemed cution Date, if nth/Day/Year)		de	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)						wnership orm:	7. Nature of Indirect Beneficial Ownership	
				(IV	ionin	/Day/ i ear)		Code V	Amount	(A) or (D)	Price	. 3 and 4)		(I	Direct (D) Own or Indirect (I) (Instr. 4)	
			Table					this fo curren	rm are itly vali	not required OMB co	red to resp ontrol numl cially Owned	ond unles ber.		contained in displays a	i SEC 14	74 (9-02)
1. Title of Derivative Security (Instr. 3)	Conversion	(Month/Day/Year) any (Code (Month/Day/Year) (Instr. 8) Securities Acquired (A) (Month/Day/Year)			7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s)	Form of Derivative Security: Direct (D) or Indirect (I)	(Instr. 4)						
				Code	V	(A)	(D)	Date Exercisable	Expira	ation Date	Title	Amount or Number of Shares		(msu. 4)	(Instr. 4)	
Stock Option (right to buy)	\$ 6	05/30/2012		J(1)		100,000		01/01/2014	4 03/29	9/2021 <sup>(2)</sup>	Common Stock, par value \$0.01	100.000	\$ 0	100,000	D	
Stock											Common	ı				

04/01/2014 09/27/2021(2)

Stock,

par value \$0.01

\$0

150,000

D

150,000

## **Reporting Owners**

\$ 4.55

05/30/2012

Option

(right to

buy)

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Sigman Brian Chad C/O NEWCASTLE INVESTMENT CORP. 1345 AVENUE OF THE AMERICAS NEW YORK, NY 10105			CFO and PAO			

## **Signatures**

/s/ Brian Sigman	06/05/2012
**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).

 $J^{(1)}$ 

150,000

- The reported stock options were granted by the issuer to Fortress Operating Entity I ("FOE I"), and affiliate of the issuer's manager, on March 29, 2011 or September 27, 2011, as applicable,
- (1) pursuant to the terms of the issuer's Nonqualified Stock Option and Incentive Award Plan adopted on June 6, 2002 and amended and restated effective as of June 23, 2003 and as of February 11, 2004 (the "Plan"). FOE I assigned such options to the reporting person effective as of May 30, 2012, who assumed the options for no value.
- (2) The stock options may terminate earlier upon termination of employment, as set forth in the applicable award agreement.

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.