FORM	4
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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).	

(Print or Type Responses)

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

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#### 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

1. Name and Address of Reporting Person <sup>±</sup> EDENS WESLEY R	2. Issuer Name and NEWCASTLE II				[NCT]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) 1345 AVENUE OF THE AMERICAS FLOOR		3. Date of Earliest Transaction (Month/Day/Year) 08/21/2014					Officer (give title below) Oth	ner (specify belo	w)	
(Street) NEW YORK, NY 10105	4	4. If Amendment, Date Original Filed(Month/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)	Table I - Non-Derivative Securities Acquire						uired, Disposed of, or Beneficially Own	ed	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	r) any Code (Instr. 8)		Code		(A) or Disposed of (D)		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		Beneficial
		(Month/Day/Year)	Code	v	Amount	(A) or (D)	Price	(Instr. 3 and 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained SEC 1474 (9-02) in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

	(e.g., puts, calls, warrants, options, convertible securities)														
Security (Instr. 3)	Conversion	Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Code	)	5. Number of 6. Date Exercisable and Derivative Expiration Date Securities (Month/Day/Year)		isable and 7. Title and Amount te of Underlying Year) Securities		Derivative Security	Securities Beneficially Owned Following Reported Transaction(s)	Ownership Form of Derivative Security: Direct (D) or Indirect (I)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	(Instr. 4)	
Stock Option (right to buy)	\$ 4.39	08/21/2014		А		197,500		<u>(1)</u>	08/21/2024	Common Stock, par value \$0.01 per share	197,500	\$ 0	1,530,833 (2)	Ι	Fortress Operating Entity I LP <sup>(3)</sup>

# **Reporting Owners**

	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
EDENS WESLEY R 1345 AVENUE OF THE AMERICAS, 46TH FLOOR NEW YORK, NY 10105	Х						

### Signatures

/s/ Wesley R. Edens	08/22/2014	
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 were fully vested on date of initial grant from the issuer to Fortress Operating Entity I ("FOE I") and become exercisable in thirty equal monthly installments beginning on the first of each month following the month in which the options were granted.

(2) The total reflects the 3-for-1 reverse stock split that occurred on August 18, 2014.

Mr. Edens may be deemed to be the beneficial owner of these securities by virtue of his relationship to FOE I. Mr. Edens disclaims beneficial ownership of any securities (and the underlying (3) shares of common stock, if applicable) of the issuer held by FOE I except to the extent of his pecuniary interest therein.

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.