## 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* MILLER PETER MARCUSSEN					2. Issuer Name and Ticker or Trading Symbol NEWCASTLE INVESTMENT CORP [NCT]						CT]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  _X_Director					
(Last) (First) (Middle) 1345 AVENUE OF THE AMERICAS, 46TH FL					3. Date of Earliest Transaction (Month/Day/Year) 07/31/2008						Office	r (give title belo	ow)	Other (spec	ify belo	w)	
NFW VO	ORK NV	(Street)		4. If	Amendment,	Date	Origin	al File	ed(Month	/Day/Year)		_X_ Form fil	ed by One Repo	Group Filing orting Person 1 One Reporting		licable l	Line)
	NEW YORK, NY 10105 (City) (State) (Zip)				Table I - Non-Derivative Securities Acqu						uired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)	Exec any	Deemed cution Date, if	(Instr. 8)		(	4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities ally Owned Following Transaction(s)		Form:	nip of Bo	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				(Moi	(Month/Day/Year)		ode	V	Amoun	(A) or (D)	Price	(Instr. 3 a	nd 4)		\ /		
Common Stock, par value \$0.01 per share		07/31/2008			A	(1)	2	238	A	\$ 6.14	17,812			D			
			Table II -		ative Securit		t cquire	conta the fo d, Dis	ined in rm dis	n this for splays a of, or Ber	rm are curre neficial	not requesting ntly valid	OMB con	spond unle trol numbe	ss		74 (9-02)
Security (Instr. 3)		3. Transaction Date (Month/Day/Y	Execution I	4. Transaction Code		5.		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. T Ame Und Secu	itle and bunt of erlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Own Forn Deri Secu Dire or In	vative rity: ct (D) direct	Beneficia Ownershi (Instr. 4)	
					Code V	(A)		Date Exerc		Expiratio Date	Title	or Number of Shares					
Repor	ting O	wners															

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
MILLER PETER MARCUSSEN 1345 AVENUE OF THE AMERICAS 46TH FL NEW YORK, NY 10105	X					

## **Signatures**

/s/ Peter Marcussen Miller	08/05/2008
**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) Purchase made pursuant to dividend reinvestment 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.