FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT OF	CHANGES IN	BENEFICIAL	OWNERSHIP

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol Newtek Business Services Corp. [NEWT]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
SLOA	NE BA	KK'	<u>Y</u>			Newter Business Services Corp. [NEW 1]								X Direc	tor		10% Ov	vner			
																er (give title		Other (s	specify		
(Last)		(First) (N	1iddle)			Date of Earliest Transaction (Month/Day/Year)						^ below	,		below)					
4800 T-F	EX AVI	ENU	E			08/0	4/202	.2									Chairma	ın & (CEO		
SUITE 1	20																				
						4. If A	Amend	ment,	Date of	f Origina	al Filed	d (Month/Da	y/Year	r)	6. lı	6. Individual or Joint/Group Filing (Check Applicable					
(Street)													-		Line	,				.	
BOCA R	ATON	FL	33	3431												X Form	filed by On	e Rep	orting Perso	on	
-																Form Perso	filed by Mo	re thai	n One Repo	orting	
(City)		(Stat	e) (Z	ip)												1 6130	л				
			Table	I - Noı	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficia	Ily Own	ed				
1. Title of	Security (nstr.	3)		2. Transac	tion										7. Nature					
					Date (Month/Da	y/Year) if any					Transaction Disposed C		Of (D) (Instr. 3, 4		3, 4 an	d Securit Benefic				of Indirect Beneficial	
					(Mor	(Month/Day/Year)		8)					Owned Report				Ownership (Instr. 4)				
				Code	v	Amount	(A) (D)	or	Price	Transa	Transaction(s) (Instr. 3 and 4)			(
Common Stock 08/04/					08/04/2	2022		A ⁽¹⁾		47,081	A	A	\$0.0	1,035,097			D				
			Tak	الملا	Dorivati	vo 80	Curi	tios /	\ cau	rod C	lien	osed of, o	or Be	onofi	الدنما	v Ownor	4		1	'	
			Iak									onvertib					u				
Derivative Conversion Date Executi Security or Exercise (Month/Day/Year) if any		on Date Execu			med on Date,	4. Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities			8. Price of Derivative Security	9. Number of derivative Securities	- 1	10. Ownership Form:	11. Nature of Indirect Beneficial		
		Day/Year)	8)		Securities Acquired		,		,	Unde	erlying		(Instr. 5)	Beneficiall Owned	y	Direct (D) or Indirect	Ownership (Instr. 4)				
	Security	"						(A) o	r	Security (Ir				ıstr.		Following		(I) (Instr. 4)	(111501.4)		
						Disposed 3 and of (D)				3 and	14)			Reported Transaction(s)	n(s)						
						(Instr. 3, 4 and 5)							(Instr. 4)								
							unu 5)		,			Amount									
														or							
										Date		Expiration		Num							
							l۷	(A)	(D)	Exercis	able	Date	Title	Shar	res		l			I	

Explanation of Responses:

1. On August 4, 2022, under the Shareholder and Board approved Newtek Business Services Corp. 2015 Stock Incentive Plan, the reporting person was granted 47,081 restricted shares of the Issuer's common stock as a restricted stock award with a three (3) year cliff vest. Dividends in the form of common stock will be paid during the restricted period, and such common stock will also vest pursuant to the vesting schedule.

Remarks:

Barry Sloane

08/05/2022

** Signature of Reporting Person

Date

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

- * 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.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.