FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	DVAL			
	OMB Number:	3235-0287			
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	Check this box if no longer subject to								
٦.	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

1. Name and Address of Reporting Person* <u>SLOANE BARRY</u>							2. Issuer Name and Ticker or Trading Symbol Newtek Business Services Corp. [NEWT]									nship of Reportii I applicable) Director	10	% Owner	
(Last) (First) (Middle) 5901 BROKEN SOUND PARKWAY, NW SUITE 501						3. Date of Earliest Transaction (Month/Day/Year) 03/20/2019									X Officer (give title Other (specify below) Chairman & CEO				
(Street) BOCA RATON FL 33487 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ine) X	'			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da						Execution Date,			Code (Instr. 5)						nd S B O	Amount of ecurities eneficially wned Following eported	6. Ownersh Form: Direc (D) or Indire (I) (Instr. 4)	of Indirect Edit Beneficial Ownership	
									Code	v	Amount	(,	A) or D)	Price	_ т	eported ansaction(s) nstr. 3 and 4)		(Instr. 4)	
Common stock 03/20/						2019		P		3,000		Α	\$1	9.7	1,023,708	D			
Common stock 03/20/						2019		P		1,000		Α	\$19	.69	1,024,708	D			
		Та									sed of, onvertib					ied			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	se (Month/Day/Year)	3A. Deemd Execution if any (Month/Da	Date, Transaction Code (Inst					6. Date Exercisable an Expiration Date (Month/Day/Year)			nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price Derivat Securit (Instr. §	ive derivative y Securities	Ownersl Form: Direct (E or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	nber					

Explanation of Responses:

Remarks:

<u>Barry Sloane</u> <u>03/20/2019</u>

** Signature of Reporting Person Date

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

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.

^{*} 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).