FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

<b>STATEMENT</b>	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL

OMB Number: 3235-0287

Estimated average burden 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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-4(x). See health stiffs.

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(0). 00	ee mstructio	11 10.																		
1. Name and Address of Reporting Person* SLOANE BARRY						2. Issuer Name <b>and</b> Ticker or Trading Symbol NewtekOne, Inc. [ NEWT ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)						
SLUAI	NE DAI	VIV.	<u>I</u>							- L	-				<b>V</b>	Direc	tor		10% O	wner
														V		er (give title		Other (	specify	
(Last)	(	First	) (N	/liddle)			3. Date of Earliest Transaction (Month/Day/Year)								belov	,		,		
4800 T-REX AVENUE			12/23/2024							Chairman & CEO										
SUITE 120																				
SOTTE 120					If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable								
(Street)						4. 11 /	Amena	ment,	Date	or Origin	ai File	u (IVIOIIIII/Da	ly/ real ,	,	Line)	viuuai 0	John Grou	b Lilli	y (Check A	pplicable
BOCA R	ATON 1	DΤ	2	3431											1	Form	filed by On	e Repo	orting Pers	on
BOCA N	AION	ĽL	3.	3431												Form	filed by Mo	re thar	n One Rep	orting
,																Perso			·	Ĭ
(City)	(	State	e) (Z	<u>Z</u> ip)																
			Table	I - No	n-Deriva	tive	Secu	rities	Acc	quired	, Dis	posed of	, or E	Benef	icially	/ Own	ed			
1. Title of S	Security (I	nstr.	3)		2. Transact	ion	on 2A. Deemed 3. 4. Securities Acquired (A)							5. Amo	ount of		Ownership	7. Nature		
	•		•		Date (Month/Day	Execution Date, /Year) if any			Transaction Disposed Of (D) (Instr. 5)			str. 3,					Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership		
(MONUM DE				(Monthibu)	(Month/Da			/Year)			• ,				Owned	l Following				
									Code	v	Amount	(A) o	) or Price		Reported Transaction(s)		1 1		(Instr. 4)	
									Code	Ľ	Amount	(D)	FII	Ce .	(Instr.	3 and 4)				
Common stock 12/23/2				.024				P		3,000	A	\$1	2.946	1,164,855			D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
(e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of	2.		3. Transaction	3A. De		4.			ımber			isable and	7. Title			Price of	9. Number		10.	11. Nature
Derivative Security	Conversion or Exercise		Date (Month/Day/Year)	Execution Date, if any		Transa Code (			Expiration Date Amount of (Month/Day/Year) Securities					rivative curity	derivative Securities		Ownership Form:	of Indirect Beneficial		
(Instr. 3) Price of (Montl				n/Day/Year)	8)		Securities		Underlying			rlying		str. 5)	Beneficially		Direct (D)	Ownership		
	Derivative Security							Acquired (A) or		Derivative Security (I				str.		Owned Following		or Indirect (I) (Instr. 4)	(Instr. 4)	
	1								Disposed of (D) (Instr. 3, 4 and 5)					3 and 4)			Reported Transaction(s)	- 1	,	
																	(Instr. 4)	n(s)		
																			1	
														Amou	ınt					
												or Numb	er				1			
				Code	Code V (A) (D)			Date Expiration Exercisable Date		of Title Shares										
						Code	_ <b>'</b>	(A)	(0)	Exercis	Sanie	Date	Title	Silare	, s					

**Explanation of Responses:** 

Remarks:

Barry Sloane

12/23/2024

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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.