**MATIS NINA** Form 4 December 07, 2011

## FORM 4

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

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Section 16. Form 4 or

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,

may continue. See Instruction

obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

Form 5

(Print or Type Responses)

1. Name and Address of Reporting Person \* **MATIS NINA** 

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

**OMB APPROVAL** 

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Number:

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(Last)

(C:tr.)

(First) (Middle) ISTAR FINANCIAL INC [SFI]

(Check all applicable)

1114 AVENUE OF THE AMERICAS, 39TH FLOOR

(Zin)

3. Date of Earliest Transaction

(Month/Day/Year)

Director 10% Owner \_X\_\_ Officer (give title \_ Other (specify below)

12/06/2011

below) Chief Legal Officer & CIO

(Street)

(State)

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

NEW YORK, NY 10036

| (City)                    | (State) (Z                           | Table                         | I - Non-De | erivative S       | ecuriti   | ies Acqu      | uired, Disposed of                      | f, or Beneficial                     | ly Owned                |
|---------------------------|--------------------------------------|-------------------------------|------------|-------------------|-----------|---------------|---|--------------------------------------|-------------------------|
| 1.Title of<br>Security    | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if | 3.         | 4. Securit        |           | •             | 5. Amount of Securities                 | 6. Ownership                         | 7. Nature of Indirect   |
| (Instr. 3)                | (Monul/Day/Teal)                     | any                           | Code       | , , , ,           |           |               | Beneficially                            | Form: Direct                         | Beneficial              |
|                           |                                      | (Month/Day/Year)              | (Instr. 8) |                   | (A)<br>or |               | Owned Following Reported Transaction(s) | (D) or<br>Indirect (I)<br>(Instr. 4) | Ownership<br>(Instr. 4) |
| Common<br>Stock           | 12/06/2011                           |                               | Code V S   | Amount 50,000 (1) | (D)       | Price \$ 6.35 | (Instr. 3 and 4)<br>206,384             | D                                    |                         |
| Restricted<br>Stock Units |                                      |                               |            |                   |           |               | 836,166 (2)                             | D                                    |                         |

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

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

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#### Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of | 2.          | 3. Transaction Date |                    | 4.         | 5.         | 6. Date Exer |            | 7. Title |          | 8. Price of | 9. Nu  |
|-------------|-------------|---------------------|--------------------|------------|------------|--------------|------------|----------|----------|-------------|--------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if | Transacti  | orNumber   | Expiration D | ate        | Amou     | nt of    | Derivative  | Deriv  |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/  | Year)      | Under    | lying    | Security    | Secur  |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e            |            | Securi   | ties     | (Instr. 5)  | Bene   |
|             | Derivative  |                     |                    |            | Securities |              |            | (Instr.  | 3 and 4) |             | Own    |
|             | Security    |                     |                    |            | Acquired   |              |            |          |          |             | Follo  |
|             |             |                     |                    |            | (A) or     |              |            |          |          |             | Repo   |
|             |             |                     |                    |            | Disposed   |              |            |          |          |             | Trans  |
|             |             |                     |                    |            | of (D)     |              |            |          |          |             | (Instr |
|             |             |                     |                    |            | (Instr. 3, |              |            |          |          |             |        |
|             |             |                     |                    |            | 4, and 5)  |              |            |          |          |             |        |
|             |             |                     |                    |            |            |              |            |          |          |             |        |
|             |             |                     |                    |            |            |              |            |          | Amount   |             |        |
|             |             |                     |                    |            |            | Date         | Expiration |          | or       |             |        |
|             |             |                     |                    |            |            | Exercisable  | Date       | Title    | Number   |             |        |
|             |             |                     |                    |            |            | Lacicisable  | Date       |          | of       |             |        |
|             |             |                     |                    | Code V     | (A) (D)    |              |            |          | Shares   |             |        |

## **Reporting Owners**

| Reporting Owner Name / Address  | Relationships |           |                                    |       |  |  |
|---|---------------|-----------|------------------------------------|-------|--|--|
| . 0   | Director      | 10% Owner | Officer                            | Other |  |  |
| MATIS NINA<br>1114 AVENUE OF THE AMERICAS, 39TH FLOOR<br>NEW YORK, NY 10036 |               |           | Chief<br>Legal<br>Officer &<br>CIO |       |  |  |

# **Signatures**

s/ Nina B Matis 12/06/2011 \*\*Signature of 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).
- On December 6, 2011, the Reporting Person, Ms. Nina Matis, sold a total of 50,000 shares of common stock of iStar Financial Inc. in open market transactions. Following the transactions reported in this Form 4, the Reporting Person is the beneficial owner of a total of 206,384 shares of iStar common stock, which are owned directly.
- The Reporting Person is also the holder of 836,166 restricted stock units representing the right to receive an equivalent number of shares **(2)** of iStar common stock (net of shares deducted for taxes and other withholdings) if and when the units vest.

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.

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