Edgar Filing: SL GREEN REALTY CORP - Form 4

| SL GREEN REA Form 4 June 05, 2007 | ALTY CORP | | | | | | | | | | | |
|---|-------------------------------------|---|--------|--|-------------|--|--------|---|--|--|-----------|--|
| FORM 4 | 1 | | | | | | | | | | PROVAL | |
| | UNITED | STATES | | | | ND EXC D.C. 205 | | IGE C | COMMISSION | OMB Number: | 3235-0287 | |
| Check this bo if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> Instructio 1(b). | suant to S a) of the l | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940 | | | | | | Expires: January 31, 2005 Estimated average burden hours per response 0.5 | | | | |
| (Print or Type Respo | onses) | | | | | | | | | | | |
| HOLLIDAY MARC Symbol | | | Symbol | Issuer Name and Ticker or Trading ^{Ibol} GREEN REALTY CORP [SLG] | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | |
| (Month | | | | vate of Earliest Transaction onth/Day/Year) 01/2007 | | | | | X Director 10% Owner X Officer (give title Other (specify below) below) Chief Executive Officer | | | |
| | | | | endment, Date Original nth/Day/Year) | | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| NEW YORK, N | NY 10170 | | | | | | | | Form filed by M Person | Iore than One Re | porting | |
| (City) | (State) (| Zip) | Table | e I - Non | -De | rivative S | ecurit | ies Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| | Transaction Date Ionth/Day/Year) | Executio any | | Code | ctior 3) | 4. Securiti (A) or Dis (D) (Instr. 3, 4 Amount | sposed | of | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | |
| Common 06 Stock 06 | 5/01/2007 | | | А | | 18,828 | А | \$0 | 471,921 | D | | |

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

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 control number.

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

| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transac Code (Instr. 8 | 5. tionNumber of) Derivativ Securitie Acquired (A) or Disposed of (D) | Expiration Date (Month/Day/Year) | | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr | |
|---|---|---|------------------------------------|--|-------------------------------------|--------------------|---|---|---|---|
| | | | Code | (Instr. 3, 4, and 5) V (A) (D) | Date Exercisable | Expiration Date | o Title N o | Amount or Number of Shares | | (|

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Reporting Owners

| Reporting Owner Name / Address | | Relationships | | | | | | | |
|--|----------|---------------|-----------|-------------------------|-------|--|--|--|--|
| | | Director | 10% Owner | Officer | Other | | | | |
| HOLLIDAY MARC C/O SL GREEN REALTY C 420 LEXINGTON AVENUE NEW YORK, NY 10170 | | X | | Chief Executive Officer | | | | | |
| Signatures | | | | | | | | | |
| /s/ Marc Holliday | 06/05/20 |)07 | | | | | | | |

**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).

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.