FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHA	NGES IN	BENEFICIAL	OWNERSHIP

OMB APPROVAL OMB Number: 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).

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* REISS DALE ANN (Last) (First) (Middle) 589 KINZIE ISLAND COURT (Street) SANIBEL FL 33957				3. D 03/	Issuer Name and Ticker or Trading Symbol ISTAR FINANCIAL INC [SFI] Date of Earliest Transaction (Month/Day/Year) 03/06/2009 4. If Amendment, Date of Original Filed (Month/Day/Year)								6.	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner Officer (give title below) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					owner (specify pplicable	
(City)	(St	ate) (.	Zip)		-											Pers	n filed by More than One Reporting on			orung
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Acc	quired,	Dis	posed o	f, or	Bene	eficia	ally (Owne	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,				ties Acquired (A) I Of (D) (Instr. 3, 4			and Securi Benefi		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Code	v	Amount	(A) or (D) Pri		Price		Transaction(s) (Instr. 3 and 4)				(11341. 4)		
Common Stock, par value \$.001 per share 03/0			03/06	6/2009				P		9,500(1	1)	A	\$1.0	088	12,500(1)(2)		I		through family trust	
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 (Instr. 3) 3. Transaction Date (Month/Day/Year) 3A. Deemed Execution Date, if any (Month/Day/Year)				ansaction of Derivice Securical (A) or Dispo of (D) (Instr. and 5)		ative rities ired osed	6. Date E Expiratio (Month/D	n Dat		Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	nt .			Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code	V (A) (D)		Date Exercisa	Date Exercisable [of Title Shares											

Explanation of Responses:

- 1. On March 6, 2009, the Reporting Person purchased 9,500 shares of common stock of iStar Financial Inc. at an average price of \$1.088 per share. Following this transaction, the Reporting Person beneficially owns a total of 12,500 shares of iStar common stock, all of which are owned indirectly through a family trust established by the Reporting Person.
- 2. The Reporting Person also holds 2,500 Common Stock Equivalents ("CSEs"), which have not yet vested. Under our Non-Employee Directors' Deferral Plan, each non-employee director receives an annual award of 2,500 CSEs that vest on the date of the next annual meeting after the date of grant, subject to the provisions of the Plan. Vested CSEs will be settled by the transfer of our common stock to the participant, unless a participant elects to receive some or all of a distribution of his or her CSEs in cash, based upon the fair market value of our common stock on the date of the distribution. Settlement generally occurs following a participant's retirement as a director, unless the participant elects a different settlement date.

03/09/2009 **Dale Anne Reiss**

** 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.