FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

Washington, D.C. 20549

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OMB APPRO	OVAL
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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*  PUSKAR GEORGE R				2. Issuer Name and Ticker or Trading Symbol  ISTAR FINANCIAL INC [ SFI ]						ck all applica	,		n(s) to Issue			
(Last) (First) (Middle) 2023 NORTH ATLANTIC AVENUE - SUITE 304				3. Date of Earliest Transaction (Month/Day/Year) 05/27/2009							Officer ( below)	give title		Other (sp below)	ecify	
(Street) COCOA BEACH (City)	FL (St		32931 Zip)	4.	If Ame	ndment, Da	te of	Original Filed	(Month/Day/	Year)	6. Inc Line)	Form file	ed by One I	Report	Check Appliting Person One Reporti	
		Tak	ole I - Non-De	rivativ	e Se	curities	Acq	uired, Dis	posed of	, or Ben	eficially	Owned				
Date			2A. Deemed Execution Date if any (Month/Day/Yea		ate,	3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4)		(A) or 3, 4 and 5	5. Amoun Securities Beneficia Owned Fo	s Form lly (D) o ollowing (I) (In	Form:	: Direct I r Indirect I str. 4)	7. Nature of ndirect Beneficial Dwnership Instr. 4)			
								Code V	Amount	(A) or (D)	Price	Transacti (Instr. 3 a	on(s)			1150.4)
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any		Code (	ransaction Derivative Securities		(A)	6. Date Exercisable and Expiration Date (Month/Day/Year)  7. Title and A of Securities Underlying Derivative Se (Instr. 3 and 4		es J Security	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	ni(5)		
Common Stock Equivalents	\$0	05/27/2009		A		22,013 <sup>(1)</sup>		(2)	(2)	Common Stock	22,013	\$0	24,513 <sup>(3</sup>	3)	D	

## Explanation of Responses:

- 1. The Reporting Person has been awarded 22,013 Common Stock Equivalents ("CSEs") under the iStar Financial Inc. Non-Employee Directors' Deferral Plan ("Plan"). These CSEs will vest on the date of the 2010 annual meeting of shareholders, subject to the provisions of the Plan.
- 2. On the relevant distribution date, vested CSEs will be settled by the transfer of shares of iStar 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 iStar common stock on the date of the distribution. The "regular distribution date" for distributions to participants is the earlier of: (1) January 1 on or next following the earlier of (i) the date the participant ceases to be a non-employee director; and (ii) the date of the participant's death; and (2) a change of control (as defined in the Plan). A participant, under certain limited circumstances, is permitted to elect to receive distributions at times other than the regular distribution date.
- 3. The Reporting Person also holds 2,500 CSEs previously awarded under the Plan, which are vested.

s/ George R Puskar

08/04/2009

\*\* 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.