FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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

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* BURTON EDWIN T III				2. Issuer Name and Ticker or Trading Symbol SL GREEN REALTY CORP [SLG]							(Che	Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
DOTTE	21, 22, 11												2	_			10% Ov	-
(Last)	(F	irst)	(Middle)		3. Date (of Earliest	Transa	action (Mor	nth/D	ay/Year)				Officer (below)	(give title		Other (s below)	pecify
C/O SL 0	GREEN RE	ALTY CORP.		- 1	JJ/UJ/2	2013												
420 LEXINGTON AVENUE			4	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)													Line		ad by One	Dana	utina Davas	
NEW YO	ORK N	Y	10170										2	_	ed by Mor		rting Persor One Repor	
(City)	(S	state)	(Zip)											F 613011				
		Ta	ble I - Non-	Derivat	ive Se	curities	s Acq	uired, [Disp	osed o	of, or E	Bene	ficially	Owned				
Date			2. Transact Date (Month/Day	Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3)				5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									v	Amount	(<i>A</i>	a) or))	Price	Transacti (Instr. 3 a	on(s)			instr. 4)
Common Stock 05/05			05/05/2	5/2015		A		164 A		\$0	6,784			D				
			Table II - D (e	erivativ e.g., put				,	•		,		•	Owned				
Derivative Conversion D		3. Transaction Date Execution I (Month/Day/Year) if any (Month/Day		Pate, Transaction Code (Instr.		Derivative		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)		Owners Form: Direct (or Indir	Ownership	Beneficial Ownership ect (Instr. 4)
				Code	v	(A)		Date Exercisable		xpiration ate	Title	o N	mount r umber f Shares		(Instr. 4)			
Phantom Stock Units	(1)	05/05/2015		A		154.637		(2)		(2)	Commo		54.637	\$0	32,852.	.56	D	

Explanation of Responses:

1 1 for 1

Edwin T. Burton, III, by
Andrew S. Levine, attorney-infact

O5/07/2015

** 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.

^{2.} The phantom stock units become payable in common stock (or in certain cases in cash) upon (unless the reporting person elects otherwise in accordance with the documents governing the applicable program) the earlier of (i) the January 1 coincident with or next following the earlier of (A) the reporting person's ceasing to be a director, and (B) the reporting person's death, and (ii) a change of control of the Company (as determined under such governing documents), in each case to the extent vested. In addition, the reporting person (i) has been permitted to elect to receive distributions in the form of installment payments, and (ii) may be permitted to receive distributions for certain unforeseeable emergencies.