King Laura

Form 3 January 02, 2009							
FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549					OMB		
I	NITIAL STA	TEMENT OF BEN SECURI		OWNERSH	IIP OF	Number: Expires: Estimated a	3235-0104 January 31, 2005
	n $17(a)$ of the	Section 16(a) of the Public Utility Holdin ) of the Investment C	ng Compan	y Act of 193		burden hour response	
(Print or Type Responses)							
Person * Statement		Date of Event Requiring atement Ionth/Day/Year)	REALTY INCOME CORP [O]			mbol	
(Last) (First)	(Middle) 01	1/01/2009	4. Relationsh Person(s) to 1			If Amendment, Date Original led(Month/Day/Year)	
600 LA TERRAZA BOULEVARD			(Check	x all applicable)	)		
(Street) ESCONDIDO, CA 9	02025				r Filing ow) _X_F C Person F	lividual or Join g(Check Applicat form filed by One n orm filed by Mor ting Person	ole Line) e Reporting
(City) (State)	(Zip)	Table I - N	lon-Deriva	tive Securiti	ies Benefic	ially Owned	L
1.Title of Security (Instr. 4)		2. Amount of Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Ownership (Instr. 5)	Indirect Benefi	cial
Common stock		40,194		D	Â		
informa require	s who respon ation containe d to respond	class of securities beneficient of to the collection of ed in this form are not unless the form displacement control number.		SEC 1473 (7-02	2)		

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

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
		Title	Security	Direct (D)	

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Date	Expiration	Amount or	or Indirect
Exercisable	Date	Number of	(I)
		Shares	(Instr. 5)

## **Reporting Owners**

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
King Laura 600 LA TERRAZA BOULEVARD ESCONDIDO, CA 92025	Â	Â	Senior VP, Assistant GC	Â		
Signatures						
/s/ Laura King 01/01/200	)9					
**Signature of Date Reporting Person						

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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.