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										

0.5

hours per response:

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 7											
Name and Address of Reporting Person* BYNOE LINDA							2. Issuer Name and Ticker or Trading Symbol SIMON PROPERTY GROUP INC /DE/									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
DINO	LINDA	<u> </u>			SPO	SPG ]									X	Direc	ctor		10% C	wner		
(Look) (Eigh) (Middle)																Offic	er (give title		Other below)	(specify		
(Last) (First) (Middle)							3. Date of Earliest Transaction (Month/Day/Year)										,		,			
ONE MAGNIFICENT MILE							05/10/2007															
980 N. MICHIGAN AVE., SUITE 1400																						
					_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														١٢	X	Eorn	n filed by On	o Bonort	ina Dorc	on		
CHICAG	O IL	$\epsilon$	60611												Λ		,	•	Ü			
				-											Form filed by More than One Reporting Person							
(City)	(St	ate) (	Zip)																			
		Tabl	e I - Nor	-Deriv	ative	Sec	curitie	s Acc	quired,	Dis	posed o	f, or	Bene	efici	ally	Owne	ed					
1. Title of S	Security (Inst	r. 3)		2. Trans	saction					3. 4. Securities Acquired (A)							ount of	6. Owne		7. Nature		
				Date (Month/	Day/Ye	Execution Date, ay/Year) if any				Transaction Disposed Of (D) (I Code (Instr. 5)			(D) (Instr. 3, 4 ar		Benefi		cially		Form: Direct (D) or Indirect	of Indirect Beneficial		
ľ					. / (1		(Month/Day/Year)		8)	8)						Owned Following (I Reported		(I) (Insti	(I) (Instr. 4)	Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)		Pric	e	Transaction(s) (Instr. 3 and 4)				(		
										_		111			<u> </u>							
Common Stock 05/10,						7			A <sup>(1)</sup>		722	A		(:	l)	9,343 <sup>(2)</sup>		I	)			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
											onvertib											
1. Title of Derivative	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	3A. Deeme		4. Transa	ction			6. Date Exercisa Expiration Date			7. Title and Amount of			8. Price		9. Number o		10. Ownership	11. Nature of Indirect		
Security (Instr. 3)			if any (Month/Day/	·   c		Code (Instr.				(Month/Day/Year)			Securities		Security (Instr. 5)		Securities Beneficially		Form:	Beneficial Ownership		
(IIISII. 3)			(WIOITIII/Da	yrrear)	8)		Acquired						Underlying Derivative			5)	Owned	or I	Direct (D) or Indirect	(Instr. 4)		
Security					(A) or Disposed			Security (Ins				str. 3			Following Reported	(1) (1	(I) (Instr. 4)					
					of (D)				"			unu 4)				Transaction	(s)					
							(Instr. 3, 4 and 5)										(Instr. 4)					
								Т			Δm	ount	1									
													or									
								Date		Expiration		Nun	nber									
				Code	۷	(A)	(D)	Exercisal		Date	Title	Sha	res									

## **Explanation of Responses:**

- 1. Non-cash compensation- Award of restricted stock under the Simon Property Group, L.P. 1998 Stock Incentive Plan. The restricted stock vests one year after the award.
- 2. Includes 134 common shares acquired through the reinvestment of dividends received on common shares awarded under the Company's Stock Incentive Plan.

<u>Linda Walker Bynoe, and her</u> <u>attorney-in-fact, Shelly Doran</u>

05/11/2007

\*\* 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.