

UNITED STATES SECURITIES AND EXCHANGE **COMMISSION**

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

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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

Staten (Mont	nent h/Day/Year			3. Issuer Name and Ticker or Trading Symbol SG BLOCKS, INC. [SGBX]			
ldle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)	
					6. Indiv Filing(C _X_ Form	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person _Form filed by More than One Reporting Person	
ip)	Tal	ble I	- Non-Derivativ	ve Securities	Beneficially	y Owned	
- for and the	Ben (Ins	neficia str. 4)	lly Owned	Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	Ownership Instr. 5)	direct Beneficial	
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1. Title of Derivative Security 2. Date Exercisab		3. Tit Secur Deriv	tle and Amount of rities Underlying vative Security	4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
Date Exercisable	Expiration Date	Title	Amount or Numb	Derivative Security	Security: Direct (D) or Indirect (I)		
	Statem (Mont 01/30 or 1/30 or	Statement (Month/Day/Year 01/30/2014 01/2014 01	Statement (Month/Day/Year) 01/30/2014 Table I 2. Amoun Beneficia (Instr. 4) The for each class of securities bether the respond to the collection of the respond unless the form of the respondence of the respondenc	Statement (Month/Day/Year) 01/30/2014 Table I - Non-Derivativ 2. Amount of Securities Beneficially Owned (Instr. 4) 2. Date Exercisable and Expiration Date (Month/Day/Year) 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) SG BLOCK 4. Relationshin Person(s) to Is (Check: _X_Director _Officer (giv) title below) 2. Amount of Securities Beneficially Owned (Instr. 4) 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) Date Expiration Exercisable Date Amount or Numbers Amount or Numbers	Statement (Month/Day/Year) O1/30/2014 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) ———————————————————————————————————	Statement (Month/Day/Year) 01/30/2014 4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director Officer (give ditle below) Table I - Non-Derivative Securities Beneficially 2. Amount of Securities Beneficially Owned (Instr. 4) 2. Amount of Securities Beneficially Owned directly or indirectly. The respond to the collection of information contained in this form are defected to respond unless the form displays a currently valid OMB control Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertibe and Expiration Date (Month/Day/Year) 2. Date Exercisable and Expiration Date (Instr. 4) 3. Title and Amount of and Expiration Date (Instr. 4) 3. Title and Amount of Securities Underlying Derivative Security Date Expiration Date (Instr. 4) Amount or Number Securities Date Expiration Date Exercisable Date Amount or Number Security Direct (D) Table I - Non-Derivative Security Security Direct (Instr. 5) 5. If Am Filed (Month/Downer Filed (Month/Day/Year) 6. Indiversion Ownership (Instr. 5) 6. Indiversion on the collection of Indirectly or indirectly. 6. Indiversion of Indirect (Indirect (Indirectly) or Indirectly. Conversion or Exercise or Exercise or Derivative Security: Direct (D)	

Reporting Owners

Reporting Owner Name / Address	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
BELL MARC N					
4400 BISCAYNE BLVD	X				
10TH FLOOR	Λ				
MIAMI, FL 33137					

Signatures

/s/ Marc N. Bell	02/05/2014
**Signature of Reporting Person	Date

Explanation of Responses:

No securities are beneficially owned

- * 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.