

**INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES**

OMB APPROVAL	
OMB Number:	3235-0104
Estimated average burden hours per response:	0.5

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* <u>GIC Private Ltd</u> <hr/> (Last) (First) (Middle) 168 ROBINSON ROAD #37-01 CAPITAL TOWER <hr/> (Street) SINGAPORE U0 068912 <hr/> (City) (State) (Zip)	2. Date of Event Requiring Statement (Month/Day/Year) 03/31/2023	3. Issuer Name and Ticker or Trading Symbol <u>ISTAR INC.</u> [ SAFE ]	
		4. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)	5. If Amendment, Date of Original Filed (Month/Day/Year) <hr/> 6. Individual or Joint/Group Filing (Check Applicable Line) <input type="checkbox"/> Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Beneficially Owned**

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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**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)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date				

1. Name and Address of Reporting Person* <u>GIC Private Ltd</u> <hr/> (Last) (First) (Middle) 168 ROBINSON ROAD #37-01 CAPITAL TOWER <hr/> (Street) SINGAPORE U0 068912 <hr/> (City) (State) (Zip)
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1. Name and Address of Reporting Person* <u>GIC Real Estate Private Ltd</u> <hr/> (Last) (First) (Middle) C/O GIC PRIVATE LIMITED 168 ROBINSON ROAD, #37-01 CAPITAL TOWER <hr/> (Street) SINGAPORE U0 068912 <hr/> (City) (State) (Zip)
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1. Name and Address of Reporting Person* <u>GIC Real Estate, Inc.</u>
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(Last)	(First)	(Middle)
ONE BUSH STREET, SUITE 1000		
(Street)		
SAN FRANCISCO	CA	94104
(City) (State) (Zip)		

1. Name and Address of Reporting Person\*

SFTY Venture LLC

(Last)	(First)	(Middle)
C/O GIC REAL ESTATE, INC. 280 PARK AVENUE, 9TH FLOOR		
(Street)		
NEW YORK	NY	10017
(City) (State) (Zip)		

**Explanation of Responses:**

**Remarks:**

**No securities are beneficially owned.**

GIC PRIVATE LIMITED,  
By: /s/ Glien Tan Cheng  
Chuan, Name: Glien Tan  
Cheng Chuan, Title:  
Managing Director; By: /s/ 04/04/2023  
Toh Tze Meng, Name: Toh  
Tze Meng, Title: Senior  
Vice President

GIC REAL ESTATE  
PRIVATE LIMITED, By:  
/s/ Chan Hoe Yin, Name: 04/04/2023  
Chan Hoe Yin, Title:  
Director

GIC REAL ESTATE,  
INC., By: /s/ Kristin  
Leung, Name: Kristin 04/04/2023  
Leung, Title: Managing  
Director

SFTY VENTURE LLC,  
By: /s/ Kristin Leung,  
Name: Kristin Leung, 04/04/2023  
Title: Managing Director

\*\* 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 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.

**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.**