FORM 3

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

## INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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 A	Address of Rep	orting Person <sup>*</sup>	2. Date of E Requiring S (Month/Day 02/04/202	tatement /Year)	3. Issuer Name and Ticker or Trading Symbol  ISTAR INC. [ STAR ]					
(Last) (First) (Middle) 1114 AVE OF THE AMERICAS 39TH FLOOR				Relationship of Reportin Issuer (Check all applicable)     Director	Person(s) to  10% Owner		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) NEW YORK (City)	NY (State)	10036 (Zip)			X Officer (give title below)  Chief Financia	below)	Other (specify below)  Officer		6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person	
Table I - Non-Derivative Securities Beneficially Owned										
1. Title of Security (Instr. 4)				i	2. Amount of Securities Beneficially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock, par value \$.001 per share					24,246	I	D			
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)										
			2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of S Underlying Derivative S (Instr. 4)		curity Convers		ise Form:	6. Nature of Indirect Beneficial Ownership (Instr.
			Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivativ Security	ve	Direct (D) or Indirect (I) (Instr. 5)	5)

**Explanation of Responses:** 

s/ Brett Asnas

02/24/2022

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.