FORM 4

☐ Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. *See* Instruction 1(b).

☐ Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

OMB APPROVAL
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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN 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 Address of Reporting Person *					2.	2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Korsmo Michelle L.				Sı	Sterling Real Estate Trust [NONE]							(Check an app	oncable)					
						3. Date of Earliest Transaction (MM/DD/YYYY)							Director		10%	Owner		
(Last)	(First)	(Mic	ddle)		3.	5. Date of Earnest Transaction (MM/DD/YYYY)							Officer (give title below) Oth			her (specify below)		
4340 18TH AVE S, SUITE 200					10/16/2023							TRUSTEE						
	(Stree	et)			4.	If An	nendme	ent, Date	Orig	inal File	1 (MM/I	DD/Y	YYYY)	6. Individual o	or Joint/G	roup Filing	(Check Appl	icable Line)
FARGO, ND 58103												X _ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(Ci	ty) (Stat	e) (Zip)											Form filed by	More man	one Keporting r	CISOII	
			Table	e I - N	on-De	rivati	ve Sec	urities A	cqui	red, Dis	posed	of, o	or Be	neficially Owne	d			
1.Title of Security				2. Tran	s. Date			3. Trans. C	ode	4. Securit		ired ((A) or	5. Amount of Secur			6.	7. Nature
(Instr. 3)					Execution Date, if any		(Instr. 8)					Following Reported Transaction(s) (Instr. 3 and 4)				of Indirect Beneficial Ownership		
											(A)	or					or Indirect (I) (Instr.	(Instr. 4)
								Code	V	Amoun			Price				4)	
Common Shares				10/16	/2023			P		125.6394	(<u>1</u>) A	\$	\$21.85			9,674.2633	D	
Common Shares				10/16	/2023			P		434.7826	(<u>1</u>). A		\$23			10,109.0459	D	
Common Shares			10/16/2023				P		29.3808	(1). A	\$	\$21.85	2,262.32		2,262.3272	I	By Daughter #1	
Common Shares 1			10/16/2023				P		434.7826	(<u>1</u>) A		\$23			2,697.1098	I	By Daughter #1	
Common Shares 1			10/16/2023				P	29.38		(<u>1</u>) A	\$	\$21.85	2,262.327		2,262.3272	I	By Daughter #2	
Common Shares			10/16/2023		P			434.7826	(<u>1</u>) A		\$23	2,697.1098			I	By Daughter #2		
Common Shares			10/16	10/16/2023			P		29.3808	(<u>1</u>). A	S	\$21.85	2,262		2,262.3272	I	By Daughter #3	
Common Shares				10/16	/2023			P		434.7826	(<u>1</u>) A		\$23			2,697.1098	I	By Daughter #3
	Tahl	le II - Der	ivativ	ye Sec	urities	Rena	ficially	v Owned	(00	nute o	alle w	arr	ante	options, conver	tible secu	rities)		
Title of Derivate	2.	3. Trans.			4. Trans							_		nd Amount of		9. Number of	10.	11. Nature
		(Instr. 8)		Derivat Acquire Dispose						s Underlying re Security		derivative Securities Beneficially Owned Following	Ownership Form of					
					Code	V	(A)	(D)		ate tercisable	Expiration Date	n Tit		nount or Number of ares		Reported Transaction(s) (Instr. 4)	or Indirect (I) (Instr. 4)	

Explanation of Responses:

(1) Includes shares acquired on October 16, 2023 under the dividend reinvestment plan

Reporting Owners	

Panarting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Korsmo Michelle L.							
4340 18TH AVE S				TRUSTEE			
SUITE 200				IKUSILL			
FARGO, ND 58103							

Signatures

/s/ Joel S Thomsen, Attorney-in-Fact	10/17/2023		
**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 control number.