

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

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

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## 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						<ol><li>Relationsh</li></ol>	5. Relationship of Reporting Person(s) to Issuer				
1 5												\ 1	(Check all applicable)			
Donlan Daniel P				E	SSE	NTIA]	L PROI	PER	RTIE	S REA	LTY	Y				
				$\mathbf{T}$	RUS	ST, IN	C. [EPI	RT	1			Director		10%	Owner	
(Last)	(First)	) (M	iddle)	3.	Date	of Earli	est Transa	ction	1 (MM/	DD/YYYY	)	_X_ Officer (g	give title below	v) Otl	her (specify	below)
(Edst) (First) (Finding)												Senior VP -	Senior VP - Capital Markets			
902 CARNEGIE CENTER					1/8/2020											
BLVD., SUITE 520																
				4.	4. If Amendment, Date Original Filed (MM/DD/YYYY)						(Y) 6. Individual	6. Individual or Joint/Group Filing (Check Applicable Line)				
							,	8		(		,			(*************************************	
PRINCETON, NJ 08540												X _ Form filed by One Reporting Person				
(City) (State) (Zip)											Form filed b	Form filed by More than One Reporting Person				
				•								•				
			Table I	- Non-De	rivat	ive Secu	rities Acc	quir	ed, Di	sposed o	f, or	Beneficially Own	ied			
1. Title of Security (Instr. 3)			2. Trans. Date								5. Amount of Securities Beneficially Owned			7. Nature		
				Execution Date, if any		(Instr. 8)			Disposed of (D) str. 3, 4 and 5)		Following Reported (Instr. 3 and 4)	Following Reported Transaction(s) Instr. 3 and 4)			of Indirect Beneficial	
								(				,			Ownership	
									(A) or						Indirect (Instr. 4) (Instr.	
						Code	V	Amou	. ,	Pric	e		4			
Common Stock 1/8/202			1/8/2020			A		4952	<u>1)</u> A	\$0.0	0	33064				
			-													
	Tab	le II - De	rivative	Securities	Ben	eficially	Owned (	e.g.,	puts,	calls, wa	rran	ts, options, conve	ertible secu	ırities)		
1. Title of Derivate		3. Trans.	3A. Deem					Deriva				ce of 9. Number of		11. Nature		
Security (Instr. 3)			Execution Date, if ar		Derivative Acquired ( Disposed of (Instr. 3, 4)					ate		ities Underlying ative Security			Ownership Form of	of Indirect Beneficial
(msu. 5)			Dute, ii ui	.,			of (D)				3 and 4)			Derivative	Ownership	
							4 and 5)							Owned Following	Security: Direct (D)	(Instr. 4)
								Date		Expiration		Amount or Number of			or Indirect	
				Code	v	(A)	(D)	Exer	cisable	Date	Title	Shares		Transaction(s) (Instr. 4)	(I) (Instr. 4)	
	<u>I</u>	<u> </u>	L	2.00		()	(-)	·					1	1. **** .7	1_/	l .

#### **Explanation of Responses:**

(1) Reflects a grant of restricted stock units that vest ratably on the first, second, third and fourth anniversaries of the date of grant, subject to the reporting person's continued employment by the Issuer through the applicable vesting date.

### Remarks:

Exhibit 24.1 - Power of Attorney (incorporated by reference to the Power of Attorney filed as Exhibit 24.1 to the Form 3 filed by the reporting person on June 27, 2018)

**Reporting Owners** 

Reporting Owner Name / Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Donlan Daniel P 902 CARNEGIE CENTER BLVD. SUITE 520 PRINCETON, NJ 08540			Senior VP - Capital Markets					

#### **Signatures**

/s/ Hillary P. Hai, attorney-in-fact	1/8/2020		
**Cignoture 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.