FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL
I	

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or Se	ection	30(h) (of the I	nvestme	ent Co	mpany Act	of 1940)						
1. Name and Address of Reporting Person* POPE MARIA M				POI	2. Issuer Name and Ticker or Trading Symbol POPE RESOURCES LTD PARTNERSHIP POPE									Relationshi neck all app X Direc	ting Person(s) to Issuer 10% Owner				
(Last) C/O PORT		ENERAL ELEC	(Middle)	CO.	3. Dat 09/10		Trans	action (Month/Day/Year)						Offic belo	er (give title w)		Other below	(specify	
(Street) PORTLAND OR 97204				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(51		(Zip)											<u> </u>					
1. Title of Security (Instr. 3) 2. Transport			2. Transac	2. Transaction Date		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		or 5. Amou Securiti Benefic		int of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or Pr	ice	Transac (Instr. 3	tion(s)			su. 4 <i>j</i>
Limited Partnership Units			09/16/2016					P		400	A	\$	65.44	21,9	21,913(1)(2)				
Limited Partnership Units			09/22/2016					P		500	A	\$	65.18	22,4	22,413(1)(2)				
Limited Partnership Units			09/23/2016					P	200		A	1 4	\$65.5		22,613(1)(2)				
Limited Partnership Units			09/16/2016					P		600 A		\$	66.23	23,213(1)(2)		D			
Limited Par	rtnership U	Jnits													60	,000	I		By a rust ⁽³⁾
Limited Partnership Units												239,317		I]	By a imited iability company ⁽⁴⁾			
		Ta	able II -								osed of, convertib				Owned				
Derivative Security (Instr. 3)	rative Conversion Date Execution Date or Exercise (Month/Day/Year) if any		on Date,	4. Transaction Code (Instr. 8)		n of		6. Date Expirati (Month/	on Da		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indirect (I) (Instr.	n: ct (D) ndirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code \	,	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amor or Numl of Share	oer					

Explanation of Responses:

- 1. Includes 1,125 units held jointly with reporting person's spouse for which reporting person disclaims beneficial ownership except to the extent of her pecuniary interest therein.
- 2. Includes 620 units previously owned by reporting person's children and reported as beneficially owned by reporting person that are now owned directly by reporting person.
- 3. Represents units held by a trust of which the reporting person is a trustee and shares voting and dispositive power. The reporting person disclaims beneficial ownership of securities held in such trust except to the extent of her pecuniary interest therein.
- 4. Represents units owned by a limited liability company of which the reporting person is a managing member. The reporting person disclaims beneficial ownership of securities owned by such limited liability company except to the extent of her pecuniary interest therein.

Remarks:

Sean M. Tallarico, Power of Attorney for Maria M. Pope

10/06/2016

** Signature of Reporting Person

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 Number.