FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* Wiltshire Andrew G.						2. Issuer Name and Ticker or Trading Symbol RAYONIER INC [RYN]									ck all app	•		s) to Is		
(Last) (First) (Middle) 225 WATER STREET SUITE 1400					3. Date of Earliest Transaction (Month/Day/Year) 05/10/2017									Officer (give title below)			below))`	
(Street) JACKSONVILLE FL 32202 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line)	ndividual or Joint/Group Filing (Check Applicable X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tabl	e I - No	n-Deriv	ative	Sec	uritie	s Ac	quired	l, Dis	sposed o	f, or E	Benefic	ially	Owne	ed				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date					Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4, 5)			and Securiti Benefici Owned I		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) ((D)	Price	•		nsaction(s) str. 3 and 4)			(Instr. 4)		
Common Shares 05/10/2					2017	017			P		6,650	A	\$27	.87	26,006		D			
Common Shares														1,060		I		By Simplified Employee Pension		
		Та	ble II -								osed of, convertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I		4. Transa Code (8)	action of (Instr. Dec Acc (A) Dis of (Instr. Acc (A) Dis of (Instr. Acc (Instruction of Instruction of Instruct		osed) :. 3, 4	6. Date Expirati (Month/	ion Da Day/Y		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of		De Se (In:	Price of crivative security sets. 5) Security Securities Beneficiall Owned Following Reported Transactio (Instr. 4)		Owne Form Direc or Inc (I) (In	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

Mark R. Bridwell, Attorney-in-05/12/2017

<u>Fact</u>

** 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.