FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APP | ROVAL |
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| OMB Number: | 3235-028 |
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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|--------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|----------------------------------------------|---------|------------------------------------------------------------|-------------------------------------------------------------------------|-------------------------------------|-------------|----------------------------------------------------------------|---------------------|------------------|--------------------------------------------|---------------------|----------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|-----|---------------------------------------|--|
| 1. Name and Address of Reporting Person* VANDENNOORT HANS E | | | | | | 2. Issuer Name and Ticker or Trading Symbol RAYONIER INC [RYN] | | | | | | | | | Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | |
| VAND | LINNOOI | XI HANS E | | | | | | | _ [| | | | | | v Offi | | ve title | Oth | | ner pecify | |
| (Last) (First) (Middle) 50 NORTH LAURA STREET 19TH FLOOR | | | | | Date of /30/20 | | t Trans | saction (Mo | onth/[| Day/Year) | | below) below) VP and Corporate Controller | | | | | | | | | |
| | | | | | _ 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) JACKSONVILLE FL 32202 | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting | | | | | | | |
| (City) | (S | tate) | (Zip) | | | | | | | | | | | | Person | | | | | | |
| | | Tab | le I - No | n-Deriv | ative | Sec | curitie | s Ac | quired, | Dis | posed o | of, or | Ben | eficial | ly Owr | ed | | | | | |
| 1. Title of Security (Instr. 3) 2. Transa Date (Month/Date) | | | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year | | Transaction Disp Code (Instr. 5) | | | ities Ad d Of (D | quire (Inst | d (A) or r. 3, 4 and | Secu Bene Own | | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | mount (A) | | Price | Repo Trans (Insti | rted action . 3 and | (s) 4) | | (1 | (Instr. 4) | |
| | | 1 | able II - | | | | | | uired, D , option | | | | | | Owne | d | | | | | |
| Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deem Execution if any (Month/Da | Date, | 4. Transactic Code (Inst | | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | Amou Secu Unde Deriv | rities rlying | Security I 4) | 8. Price Derivati Security (Instr. 5) | ve de Se Be Ov Fo Re Tr | Number of privative ecurities eneficially wned ollowing eported ansaction(estr. 4) | Ownersh Form: Direct (D or Indire (I) (Instr. | (D) | Beneficial Ownership (Instr. 4) | |
| | | | | Co | Code | v | (A) | (D) | Date Exercisabl | | xpiration ate | Title | | Amount or Number of Shares | | | | | | | |
| Employee Stock | \$41.2 | 12/30/2003 | | | A | | 7,000 | | (1) | 0 | 1/01/2014 | Comr | | 7,000 | \$0 | | 7,000 | D | | | |

Explanation of Responses:

1. Vests in one-third installments annually commencing 12/30/04.

Remarks:

Option

By: W. Edwin Frazier, III, Attorney-in-Fact

12/31/2003

** 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 Number.