FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGE	S IN BENEFICIAL	. OWNERSHIP

l	OMB APPRO	VAL
	OMB Number:	3235-0287
l	Estimated average burd	en
l	hours per response:	0.5

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 Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  POPE MARIA M						2. Issuer Name and Ticker or Trading Symbol POPE RESOURCES LTD PARTNERSHIP POPE POPE										5. Relationship of Repor (Check all applicable) X Director			Owner		
(Last) (First) (Middle) C/O PORTLAND GENERAL ELECTRIC CO. 121 SW SALMON ST					01/	3. Date of Earliest Transaction (Month/Day/Year) 01/14/2019										Officer (give title below)		below			
(Street) PORTLAND OR 97204					4. If	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)	(St		Zip)											<u> </u>							
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Da			ction	tion 2A. Deemed Execution Date			3. Transa Code (	ction	4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			or	r 5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) (D)	or Pri	се	Reporte Transac (Instr. 3	tion(s)		(	Instr. 4)		
Limited Partnership Units 01/14			01/14/	2019				A		720	A	\$	60.5	31	,362	Ι	)				
Limited Partnership Units															60	,000	]		By a rust <sup>(1)</sup>		
Limited Partnership Units														239	),317	1		By a imited iability company <sup>(2)</sup>			
Limited Partnership Units														21	,212	1		By a rust <sup>(3)</sup>			
		Та									osed of, onvertib				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deen Executio if any (Month/D	n Date,	4. Transa Code ( 8)		of Deri Secu Acq (A) o Disp	osed )) :r. 3, 4	Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly O FG Di OI (I)	0. Iwnership orm: irect (D) r Indirect ) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Numb of Share	er							

## **Explanation of Responses:**

- 1. 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.
- 2. 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.
- 3. Represents units held by a trust for reporting person's children for which reporting person holds voting and dispositive power by virtue of her position with the trust. The reporting person disclaims beneficial ownership of securities owned by such trust except to the extent of her pecuniary interest therein.

## Remarks:

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

01/15/2019

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.