FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ashington,	D.C.	20549	
asimigion,	D.O.	20040	

-	OMB APPR
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:

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

OMB APPROVAL							
OMB Numbe	er: 3235-0287						
Estimated av	verage burden						
hours per re	sponse: 0.5						

1. Name and Address of Reporting Person* Wiltshire Andrew G.				2. Issuer Name and Ticker or Trading Symbol RAYONIER INC [RYN]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	(Fi	rst) (I	Middle)	3. Date of Earliest Transaction (Month/Day/Year) 05/17/2024							Officer (give title below)				(specify			
1 RAYONIER WAY					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) WILDLI	GHT FL	. 3	2097												filed by M		porting Pe an One Re		
(City)	(St	ate) (2	Zip)		Ru	Rule 10b5-1(c) Transaction Indication							on '						
						Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Date			2. Transaction Date (Month/Day/	Execution Date,		,			Acquired (A) or (D) (Instr. 3, 4 and		Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following Reported		rnership : Direct · Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									Code	v	Amount	(A) or (D)	Price	Transact (Instr. 3 a	ion(s)			(Instr. 4)	
Common	Shares			05/17/20)24	05/1	7/202	024 A		4,116(1)	A	\$30.3	7 64,058	64,058.553(2)		D			
Common	Shares													3,/54.981 ⁽³⁾ 1 Emj			By Simplified Employee Pension		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Execution Date, if any (Month/Day/Year)					Transaction of Code (Instr. Derivative		Expiration Date Ar (Month/Day/Year) Se Ur De Se			7. Title Amou Secur Under Deriva Secur 3 and	int of rities rlying ative rity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (D or Indirec (I) (Instr.	Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Expiratio		Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. Restricted stock granted as compensation for serving as a member of the Board of Directors of the Issuer. Such award vests immediately and is subject to restrictions on transfer until the earlier of four years from the date of the grant or upon a date six months following the date on which the Reporting Person ceases to serve as a member of the Board of Directors.
- 2. This amount includes 5714.685127 common shares acquired pursuant to dividend reinvestment features in brokerage accounts.
- 3. This amount includes 154.35 common shares acquired pursuance to dividend reinvestment features in brokerage accounts.

Remarks:

/s/ Sarah E. Miles / Attorney-In-Fact

05/21/2024

** 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.