FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL					
DMB Number:	3235-0287				
Estimated average burden					
ours per respon	se 0.5				

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Ty	pe Response	es)		1											
Name and Address of Reporting Person * Billingsley Chester				2. Issuer Name and Ticker or Trading Symbol Mentor Capital, Inc. [MNTR]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner				
P.O. BOX		(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 08/30/2016						X Officer (give title below) Other (specify below) Chief Executive Officer					
(Street) RAMONA, CA 92065				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person				ble Line)	
(City		(State)	(Zip)	Т	able I	- Non	-Deri	vative S	ecurities	Acqui	ired, Disp	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye		2A. Deemed Execution Date, it any (Month/Day/Year		if Code (Instr. 8)		4. Securities Acqui (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficia	lly Owned I Transaction	of Securities y Owned Following ransaction(s)		7. Nature of Indirect Beneficial Ownership
						Code	V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		08/30/2016	08/30/2016		S ⁽¹⁾		500	D	\$ 0.30	4,987,28	36		D	
			Table II - D	Derivative Secur	ities A		cont the f	ained in orm dis	n this fo splays a	rm ar curre	e not req	ection of in uired to re d OMB cor	spond un	less	EC 1474 (9- 02)
	1.		,	e.g., puts, calls, v			_						I		
Security	Conversion	ise (Month/Day/Yea	Execution Da (Year) any	4. Transactio Code Year) (Instr. 8)	of Der Section Acquired (A) Display of (Ins.)			r 6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Und Secu	ount of derlying surities str. 3 and	Derivative	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	Ownershi (Instr. 4) D)
											Amount				

Reporting Owners

Describer Occurs Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Billingsley Chester P.O. BOX 1709 RAMONA, CA 92065	X	X	Chief Executive Officer				

Signatures

/s/ Chester Billingsley	08/31/2016
**Signature of Reporting Person	Date

Explanation of Responses:

- * 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).
- (1) All sales per 10b5-1 Plan initiated August 15, 2016.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.