# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
Estimated average burden
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).

#### 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

	pe Response	3)		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					
(Last) (First) (Middle) P.O. BOX 1709			3. Date of Earliest Transaction (Month/Day/Year) 03/22/2017						X_ Office	er (give title bele Chie	Executive O	ther (specify b	elow)	
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year) 03/22/2017						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person					
RAMON	IA, CA 920	065									d by More than	One Reporting 1	Jison	
(City	7)	(State)	(Zip)	Т	able I - Non	-Deriv	vative S	Securities	s Acqui	red, Dispo	osed of, or I	Beneficially C	wned	
(Instr. 3)		2. Transaction Date (Month/Day/Year)		f Code (Instr. 8)	(	on 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)			ollowing	6. Ownership Form:	7. Nature of Indirect Beneficial	
				(Month/Day/Yea	Code	V	Amoun	(A) or	Price	(Instr. 3 and 4)			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)
			03/22/2017		S <sup>(1)(2)</sup>		4.500 D	\$ 2.44	4,594,98	986		) )		
Reminder:	Report on a s	separate line for	r each class of secur	rities beneficially o		Perso conta	ns wh ined ir	o respo	rm are	not requ		pond unles	s	1474 (9-02)
Reminder:	Report on a s	separate line for	Table II -	Derivative Securi	ties Acquire	Perso contai the fo	ons wh ined ir orm dis	o respo this fo plays a	rm are currei neficial	not requ ntly valid	ired to res		s	1474 (9-02)
			Table II -	Derivative Securi	ties Acquire arrants, op	Perso contain the fo ed, Disp	ons wh ined ir orm dis posed o	o respo n this fo plays a of, or Ben tible secu	rm are currenteficial	not requantly valid	ired to res	pond unles rol number	s	, ,
1. Title of	2. Conversion or Exercise Price of Derivative Security	3. Transaction	Table II -	Derivative Securi	ties Acquire arrants, op	Perso contain the fo ed, Disp tions, of 6. Dat and Ex	ons wh ined ir orm dis	o responding this for Bertible secutions Date	neficial rities) 7. Ti Amo Undo Secu	not requ ntly valid	OMB conf	pond unles	f 10. Ownersh Form of Derivati Security Direct (I or Indire	11. Natu of Indire Benefici: Ownersh (Instr. 4)

# **Reporting Owners**

	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	03/23/2017
**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) The Form 4, as originally filed, contained a typographical error which incorrectly reported the Transaction Code under Item 3 as "P". The Form 4, as amended by this Form 4/A, corrects this typographical error and now correctly reports the Transaction Code under Item 3 as "S".
- (2) All sales per 10b5-1 Plan initiated February 15, 2017.

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.