FORM 4

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

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

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

1. Name ar											5 D 1 .:	1: 00		/ \ . •	
1. Name and Address of Reporting Person *			2. Issuer Name and Ticker or Trading Symbol							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Shaul Stan				Mentor Capital, Inc. [MNTR]						_X_ Direct	tor		10% Owner		
(Last) (First) (Middle) 2586 CLAYBOURNE COURT				3. Date of Earliest Transaction (Month/Day/Year) 02/15/2017							Office	r (give title belo	ow)	Other (specify l	pelow)
(Street)				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				
NEWBURY PARK, CA 91320									Form filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acqu					Acqui	uired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Year)		Execution Date, if C		Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D)	Beneficial Ownership			
						Code	V	Amoun	(A) or (D)	Price				or Indirect (I) (Instr. 4)	(Instr. 4)
Common	Stock		02/15/2017	02/15/2017		S		5,000	D	\$ 2.35	25 042			D	
Common	Stock		02/16/2017	02/16/2017		S		5,000	D	\$ 2.50	30,043			D	
Common Stock 02/		02/17/2017	02/17/2017		S		5,000	D	\$ 2.75	25,043			D		
G	ommon Stock 02/17/2017		00/17/0017						Φ.						
Common	SIOCK		02/1//201/	02/17/2017		S		5,000	D	2.95	20,043			D	
		separate line fo	or each class of secu		lly ow		ctly o	Ĺ	D	2.95	20,043			D	
Reminder:		separate line fo			lly ov		Pers	r ons wh	o respo	nd to	the colle	ection of ir uired to re d OMB cor	espond un	n S less	EC 1474 (9- 02)
Reminder:		separate line fo	or each class of secu Table II - D	rities beneficial	rities	vned dire	Pers cont the f	r ons wh ained in orm dis	o responding this for splays a	ond to rm are curre	the colle e not req ently valid	uired to re d OMB cor	espond un	n S less	,
Reminder: indirectly.	Report on a	•	Table II - D	rities beneficial perivative Secu	rities warı	vned dire	Pers cont the f	r cons wh ained in form dis	o responding this for splays and of, or Berible secu	ond to rm ar curre neficia	the colle e not req ently valid	uired to red OMB con	espond un ntrol numb	n S less per.	02)
Reminder: indirectly.	Report on a 2. Conversion	3. Transaction	Table II - D (6 1 3A. Deemed Execution Day	rities beneficial	rities warr	s Acquire	Pers cont the f ed, Di tions,	r cons wh ained in form dis	o responding to responding the security of the	ond to curre curre neficia irities) 7. T Am Und Seco	the colle e not req ently valid	uired to red OMB con	espond un	of 10. Owners Form of y Derivat Security Direct (or Indir	11. Natur of Indirec Beneficia Ownersh (Instr. 4)

Reporting Owners

Barrella Oraca Nama / Addams	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Shaul Stan 2586 CLAYBOURNE COURT NEWBURY PARK, CA 91320	X					

Signatures

/s/ Stan Shaul	02/17/2017
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).

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.