Stewart Niccole

January 29, 2018

Form 3

FORM 3 UNITED STATES S			TES SECURITIES AN	SECURITIES AND EXCHANGE COMMISS			ON OMB APPROVAL		
	I J		Washington, I	D.C. 20549			OMB Number:	3235-0104	
		INITIAL S	STATEMENT OF BEN		OWNERSH	IIP OF	Expires:	January 31	
		tion $17(a)$ of	SECURI at to Section 16(a) of the f the Public Utility Holdi 80(h) of the Investment C	Securities E	y Act of 193		Estimated burden hou response	urs per	
(Print or Type]	Responses)								
Person * Stat			 Date of Event Requiring Statement (Month/Day/Year) 	Four Corners Property Trust, I					
(Last)	(First)	(Middle)	01/29/2018	4. Relationship of Reporting Person(s) to Issuer			Amendment, D d(Month/Day/Yes	0	
C/O FOUR CORNERS PROPERTY TRUST, INC., 591 REDWOOD HIGHWAY, SUITE 1150 (Street)				(Check all applicable) Director 10% Owner Officer Other (give title below) (specify below) Chief Accounting Officer			 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting 		
MILL VAL	LEY, C.	AÂ 94941				Pers			
(City)	(State)	(Zip)	Table I - I	Non-Deriva	tive Securiti	ies Benefi	cially Owned	ł	
1.Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)		4. Nature o Ownership (Instr. 5)	-			
Common St	tock		4,751		D	Â			
Reminder: Rep owned directly			each class of securities benefic	cially S	SEC 1473 (7-02	2)			
	infor requ	rmation cont ired to resp	spond to the collection of tained in this form are not ond unless the form disp MB control number.	t					
	Fable II - D	erivative Secu	urities Beneficially Owned (e	e.g., puts, calls	, warrants, op	tions, conve	rtible securitie	s)	

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)

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		(Instr. 4)		Price of	Derivative
Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships				
	Director	10% Owner	Officer	Other	
Stewart Niccole C/O FOUR CORNERS PROPERTY TRUST, INC. 591 REDWOOD HIGHWAY, SUITE 1150 MILL VALLEY, CA 94941	Â	Â	Chief Accounting Officer	Â	
Signatures					
/s/ James L. Brat as Attorney-in-Fact for Niccole Stewart	01/29/2018				
**Signature of Reporting Person	D	ate			
Explanation of Responses:					
* If the form is filed by more than one reporting person, <i>see</i> Instruction 5(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).

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Remarks:

Exhibit 24: Power of Attorney

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.