FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washing

Washington, D.C. 20049	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-028		
OTAL EMERT OF STATISES IN BEITEI TOTAL OWITERSTIN	Estimated average burden			

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 Number: 3235-0287								
Estimated average burden								
hours per response:	0.5							

Name and Address of Reporting Person* Gonzalez Jorge Luis						2. Issuer Name and Ticker or Trading Symbol ST JOE CO [JOE]											olicable)	ng Pers	g Person(s) to Issuer 10% Owner	
(Last) (First) (Middle) 133 S WATERSOUND PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 11/21/2018										X		Officer (give title below) Presider		Other (specify below)	
(Street) WATERSOUND FL 32461 (City) (State) (Zip)				4. If	4. If Amendment, Date of 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						
		Tabl	e I - Noi	ո-Deriv	ative	Se	curitie	s Acc	quired,	Dis	posed o	f, o	r Ben	efici	ally (Owne	ed			
Date					2A. Deemed Execution D Day/Year) if any (Month/Day/			n Date,	Code (Instr.							Securi Benefi Owner	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(instr. 4)
Common	Stock			11/21	/2018	3			P		1,700)	A	\$14	.59	1	4,300			
		Та	able II - I								sed of, onvertib				y Ov	vned				
1. Title of Derivative Security (Instr. 3) 2. Conversion of Exercise Price of Derivative Security		3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date, ay/Year)	Code (8)	ransaction of ode (Instr. Derivative		rative rities ired r osed) : 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title			int er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ov Fo Di or (I)). wnership orm: irect (D) · Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

Remarks:

/s/Jorge Luis Gonzalez

11/26/2018 Date

** 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.