FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

Section 16. Form 4 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

		1300	or occi) or the	1117	Collifori	. 00	лпрап	y Act 01 1340							
ř .	pe Respons								1.	- 5	·			_			
1. Name and Address of Reporting Person - 2. Issuer Name and Symbol				nd 7	Ticker or	Trac	9	5. Relationship of Reporting Person(s) to Issuer									
MUTZ GREGORY T ALICO INC [alco]				0]				(Check all applicable)									
(Last) (First) (Middle) 3. Date of Earliest Tra				Trar	nsaction			X Director 10% Owner Officer (give title Other (specify									
C/O BALDWIN & LYONS (Month/Day/Year)							1	below) below)				_					
INC, 1099 NORTH MERIDIAN 12/22/200			006	06													
STREET (Street) 4. If Amendment, Date) o t o	Original			6. Individual or Joint/Group Filing(Check				_					
(Street) 4. If Amendment, Dat Filed(Month/Day/Year)					tte Original			Applicable Line)									
INDIANAPOLIS, IN 46204				.,				_X_ Form filed by One Reporting Person Form filed by More than One Reporting Person									
(City) (State) (Zip) Table I - Non-Deri				eriv	ative Se	curi	ities Ac	cquired, Disposed of, or Beneficially									
1.Title of	2. Trans	action	2A. Deei	med	3.		4. Secu	ities		5. Amount of	6.	7	7. Nature				
Security	Date		Executio	n Date, if	Transac	tion	Acquire	d (A)	or or	Securities	Owne	rship	of Indirec	t			
(Instr. 3)	(Month/I	Day/Year)		Day/Year)	Code		Dispose (Instr. 3,		. ,	Beneficially Owned	Form: Direct		Beneficia Ownersh				
			(IVIOTILI7L	Jay/Teal)	(111511.0)		(111511.5,	4 ai	10 3)	Following	or Indi	` '	Instr. 4)	Р			
								(A)		Reported	(l)	4)					
					Code	v	Amount	or (D)	Price	Transaction(s) (Instr. 3 and 4)	(Instr.	4)					
Alico, Inc	.,							,		,							
Common									\$								
Stock, Pa	ar 12/22/2	2006	12/22/2	2006	Α		862	Α	56.99	12,498	D						
Value \$1.00																	
Ψ1.00			<u> </u>														
	Report on a			ach class	of securi	ties											
	, 0111100 0111					Р	ersons	who	respon	d to the collecti	ion of		SEC 147	' 4			
										d in this form a			(9-0	2)			
										unless the form control number		/s a					
							-										
				e Securiti s, calls, wa						neficially Owne curities)	ed						
1. Title of	2.	3. Trans		3A. Dee		4.		5.		6. Date Exercis	sable	7. Title	e and	8. Price of	9. Number of	10.	11. Nature
	Conversion) (V r)		n Date, if				ımber	and Expiration		Amou			Derivative	Ownership	
Security (Instr. 3)	or Exercise Price of	(IVIOTILIT/L	Day/Year)		Day/Year)		de str. 8)	of De	rivative	(Month/Day/Ye	ear)	Unde		Security (Instr. 5)	Securities Beneficially	Form of Derivative	Beneficial Ownership
(/	Derivative					`	,	Se	curities			(Instr.	3 and	()	Owned	Security:	(Instr. 4)
	Security								quired) or			4)			Following Reported	Direct (D) or Indirect	
									sposed						Transaction(s)		
									(D)						(Instr. 4)	(Instr. 4)	
									str. 3, and 5)								
								7,	(10.0)			1	Amount				
										Date Ex	xpiration		or				
										Exercisable Da	•	Title	Number of				
						С	ode V	(A	(D)				Shares				
		-				1		,	/								

Reporting Owners

5 6	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
MUTZ GREGORY T C/O BALDWIN & LYONS INC 1099 NORTH MERIDIAN STREET INDIANAPOLIS. IN 46204	х						

Signatures

Gregory T. Mutz	12/02/2006
-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.