# FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 Estimated average **SECURITIES**

OMB APPROVAL OMB 3235-Number: 0287 burden hours per response...

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Re	esponses	)															
Name and Address of Reporting Person      Lewis Steven C				2. Issuer Name and Ticker or Trading Symbol ALICO INC [alco]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
(Last) (First) (Middle) 11334 PHOENIX WAY				3. Date of Earliest Transaction (Month/Day/Year) 02/20/2015					Director 10% Owner X Officer (give title Other (specify below) below) Treasurer				pelow)				
(Street) NAPLES, FL 34119				4. If Amendment, Date Original Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(State	(Zip)		Table I - I	Non-De	rivat	ive Secu	ırities	Acqu	ired,	, Disposed	of, or	Beneficia	ally Owner	i		
(Instr. 3)		2. Transaction Date (Month/Day/Year)		Deemed 3. Ition Date, if Transactic Code (th/Day/Year) (Instr. 8)			4. Securitie Acquired (ADisposed of (Instr. 3, 4		(D) nd 5)	See Be Fo	5. Amount of Securities Beneficially Ov Following Rep Transaction(s)		6. Owner Form: Direct (	t (D) Own	direct ficial ership		
					Code	v	Amour	or (D			str. 3 and 4)	)	(I) (Instr. 4	4)			
Alico, Inc., Common Stoc Par Value \$1.0		/20/2015	02/2	20/2015	S		1,500	D		8 54	17		D				
Reminder: Report directly or indirect		eparate line for ea	ch cla	ass of securitie	s benefi	cially	owned										
J	Ĭ					inf red	ormati quired	on co to re	ontain spond	ed ii I unl	o the colle n this form less the fo ntrol numb	n are i rm di	not	(	1474 9-02)		
				ative Securities outs, calls, war	-		•				•	l					
(Instr. 3) Price	version I kercise ( of vative	se (Month/Day/Yea	Ex an	a. Deemed ecution Date, i y Ionth/Day/Yea	Code		of Deriv Secur Acqu (A) o Dispo of (D (Instr	Number and E		Exercisable piration Date n/Day/Year)		Secur (Instr 4)	unt of rlying		ve Derivative Securities	Ownership Form of Derivative Security: Direct (D) or Indirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Cod	e V	(A)		Date Exerci	sable	Expiration Date	Title	or Number of Shares				

### **Reporting Owners**

Reporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Lewis Steven C							
11334 PHOENIX WAY			Treasurer				
NAPLES, FL 34119							

## **Signatures**

Steven C. Lewis	02/24/2015
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.