FORM 4

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

OMB APPROVAL							
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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

Print or Ty	pe Response	es)															
Name and Address of Reporting Person * Arlon Valencia Holdings LLC				2. Issuer Name and Ticker or Trading Symbol ALICO INC [alco]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner					
(Last) (First) (Middle) 767 FIFTH AVENUE 15TH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 04/05/2016								r (give title belo		Other (specify b	elow)	
(Street)				4. If A	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					
NEW YORK, NY 10153										Form filed by More than One Reporting Person							
(City)	(State)	(Zip)			Tab	ole I - Non-	-Deri	vative S	ecurities .	Acqui	red, Disp	osed of, or	Beneficially	Owned		
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Yea		ĺ	Code (Instr. 8)	(A) or Disposed of (D) (Instr. 3, 4 and 5)		of	Beneficia	eially Owned Following ed Transaction(s)		Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amour	or (D)	Price	e			or Indirect (I) (Instr. 4)	(Instr. 4)	
Alico, Inc Par Value	e., Commo e \$1.00	n Stock,	04/05/2016	04/05	5/2016		A		1,155 (1)	A \$	3 27.60	7,990			D		
Reminder: indirectly.	Report on a	separate line fo	or each class of seco	urities b	oeneficia	ally o		Pers	ons whained i	n this for	rm ar	e not req	uired to re	formation espond unl	ess	EC 1474 (9- 02)	
			Table II - I					d, Di	isposed	of, or Ben	eficia	-		na or namb			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		Execution Da	ate, if			of	6. Date Exer and Expiratio (Month/Day/		on Date Ar VYear) Un Se		itle and bunt of lerlying urities tr. 3 and	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form of Derivativ Security Direct (I or Indire	Ownershi (Instr. 4) O)	
					Code	V	(A) (D)	Date Exe	e rcisable	Expiration Date	n Title	Amount or Number of Shares					
Repor	ting O	wners				!	. , ()	•			1						
Reporting Owner Name / Address Director 1		Relati	Relationships														
		10% Ov	wner O	Office	or Other												
767 FIFT	lencia Hole H AVENU RK, NY 1	JE 15TH FL	OOR X														

Signatures

Arlon Food and Agriculture Partners, LP, its sole member	04/06/2016		
**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).
- The shares of the Company's Common Stock being reported in this Form 4 were issued to Benjamin D. Fishman, an employee of an affiliate of Arlon Food and Agriculture Advisors LLC, as nominee on behalf of Arlon Food and Agriculture Advisors LLC, and is required to transfer such shares to Arlon Valencia Holdings LLC (Collectively, "Arlon"). Mr. Fishman is serving as a director of the Company on behalf of Arlon and received the shares of the Company's Common Stock, as nominee on behalf of Arlon, in connection with such service on the Company's board of directors.

Remarks:

These shares were issued under the Stock Incentive Plan of 2015.

 $Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, {\it see}\ Instruction\ 6 for procedure.$

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.