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

OMB APPROVAL					
OMB Number:	3235-0287				
Stimated average burden					
ours per response	e 0.5				

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 Type Responses	s)												
Name and Address of Reporting Person * Arlon Valencia Holdings LLC			2. Issuer Name and Ticker or Trading Symbol ALICO INC [alco]					5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
767 FIFTH AVENUE 15TH FLOOR			3. Date of Earliest Transaction (Month/Day/Year) 01/05/2017				-	Office	(give title belo	w) (Other (specify b	elow)	
NEW YORK, NY 10	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person						
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
~		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		f	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Following a(s)	6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership
				Code	V	Amount	(A) or (D) P	rice	ce			or Indirect (I) (Instr. 4)	(Instr. 4)
Alico, Inc., Common Par Value \$1.00	Stock, 01/	05/2017	01/05/2017	A		1,187 (1)	A \$ 20	6.85	11,405			D	
			Derivative Securiti	es Acquire	cont the f	ained in orm dis sposed o	this for plays a c	m are curre	not req	uired to re d OMB cor	formation espond unle etrol number	ess	EC 1474 (9- 02)
1. Title of Derivative Conversion or Exercise (Instr. 3) Price of Derivative Security Security 3. Transaction Date (Month/Day/Y		3A. Deemed Execution Da any	4. Transaction Code Year) (Instr. 8)	5. Number of	r 6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Are See		7. Ti Amo Undo Secu (Inst	Title and 8. Price of		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownersh Form of Derivativ Security: Direct (D or Indirect	Ownership (Instr. 4) cct	
			Code V	(A) (D)	Date Exer	e I rcisable I	Expiration Date	Title	Amount or Number of Shares				
Reporting O	wners												
Reporting Owner N	Name / Address		Relationships										
		Director 1	0% Owner Office	or Other									

Powerfier Community (Addison	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Arlon Valencia Holdings LLC 767 FIFTH AVENUE 15TH FLOOR NEW YORK, NY 10153	X						

Signatures

Arlon Food and Agriculture Partners, LP, its sole member	01/05/2017		
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 (1) 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.