FORM 4

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

OMB APP	ROVAL					
OMB Number:	3235-0287					
MB Number: 3235-0287 stimated average burden						
hours per response						

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 Typ	e Response	es)																		
1. 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					
767 FIFTH AVENUE 15TH FLOOR (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 04/05/2017									r (give title belo		Other (specify l	below)		
NEW YORK, NY 10153					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 Form filed by More than One Reporting Person						
(City) (State) (Zip)					Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned															
(Instr. 3) Date		Date			ZA. Deemed Execution Date, if any (Month/Day/Year)		ansac		4. Securities Acqui (A) or Disposed of (D) (Instr. 3, 4 and 5)			uired of	5. Amour Beneficia	unt of Securities cially Owned Following d Transaction(s)		6. Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							de	V			A) or O) 1	Price				(I) (Instr. 4)				
Alico, Inc., Common Stock, Par Value \$1.00 04/05/2017			017	04/05	Α			1,194 (1)	A	\$ 2	8 26.70	12,599			D					
Reminder: Findirectly.	Report on a	separate line f	for each clas	ss of secu	rities l	peneficially	owned	direc	tly or	г										
			Tal			tive Securit	_	uirec	conta the fo	ained in orm dis sposed o	n thi splay of, or	s for ys a · Ben	rm are curre eficial	not req	uired to re d OMB cor	formation spond unl itrol numb	less	EC 1474 (9- 02)		
1. Title of	2	3. Transactio	on 3A	(e Deemed		its, calls, wa 4.				convert ate Exer				tle and	8 Price of	9. Number	of 10.	11. Natur		
Derivative Security (Instr. 3) Price Deriv	Conversion		Year) Exec	Execution Dat		Transaction Code	of	tive ties red sed	and l	Expiration Da onth/Day/Year		ate	Amo Und Secu	ount of erlying prities r. 3 and	Derivative		Owners Form o Derivat Securit Direct (or Indir	hip of Indired Beneficia Ownersh (Instr. 4) ect		
						Code V	(A)	(D)	Date Exer	cisable		ration	n Title	Amount or Number of Shares						
Repor	ting O	wners			·								•							
					Relat	ionships														
Reporting Owner Name / Address Director 1		10% Owner Officer Other																		
Arlon Valencia Holdings LLC 767 FIFTH AVENUE 15TH FLOOR NEW YORK, NY 10153																				
Signat	ures																			
Arlon Foo	od and Ag	riculture Pa	rtners, LP.	, its Sole	e Men	mber	()4/06	6/20	17										

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

**Signature of Reporting Person

- ** 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.

Date

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.