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

OMB APPROVAL					
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ours per respons	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 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]					4	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) 10/03/2017					_		r (give title belo		Other (specify b	elow)
(Street) NEW YORK, NY 10153			4. If Amen	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 Acqui					s Acquii	lired, Disposed of, or Beneficially Owned					
1.Title of S (Instr. 3)	ecurity		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Date, if	f Code (Instr. 8)		tion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of (D)				Form:	7. Nature of Indirect Beneficial
					Code	V	Amoun	(A) or (D)	Price	(mstr. 3 a	nd 4)		· /	Ownership (Instr. 4)	
Alico, Inc Par Value	c., Commo e \$1.00	n Stock,	10/03/2017	10/03/201	17	A		921 <u>(I</u>	1 /	\$ 34.60	14,527			D	
				Derivative S		ies Acquir	the f	tained i form dis	n this fo splays a of, or Be	orm are a curre neficial	not req	uired to re	nformation espond unl ntrol numb	ess	EC 1474 (9- 02)
1 7741	2	3. Transactio		(e.g., puts, ca	alls, wa						41 1	lo p.:c	9. Number o	C 10	11. Nature
1. Title of Derivative Security (Instr. 3)	Conversion		Execution Day (Year) any	Transactio Code (Year) (Instr. 8)	. 8)	of	and Expiration Date (Month/Day/Year) Au Un Se		Amo Undo Secu (Inst	ount of derlying urities str. 3 and Derivative (Instr. 5)		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Ownersl Form of Derivati Security Direct (I or Indire	of Indirect Beneficial Ownership (Instr. 4)	
				Cod	le V	(A) (D)		e rcisable	Expiration Date	on Title	Amount or Number of Shares				
Renor	ting ()	wners													

Describe Committee (Addition	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	10/04/2017
**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 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 (1) Agriculture Advisors LLC, as nominee on benail of Arion Food and Agriculture Advisors LLC, and its required to the Company's Common Stock, as nominee on (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.