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)														
1. Name and Address of Reporting Person * Kiernan John E				2. Issuer Name and Ticker or Trading Symbol ALICO INC [ALCO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) (First) (Middle) 110 CROTON AVENUE			3. Date of Earliest Transaction (Month/Day/Year) 09/04/2018								X Officer (give title below) Other (specify below) Executive Vice President & CFO					
			4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ For	6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person _Form filed by More than One Reporting Person					
MOUNT KISCO, NY 10549 (City) (State) (Zip)			Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned													
											5. Amount of Securities Beneficially 6. 7. Nature					
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			2A. Deemed Execution Date, r) any (Month/Day/Yea		Date, if	e, if Code (Instr. 8)		A) or Disposed of (Instr. 3, 4 and 5) (A) or						ownership of orm: Bo Orect (D)	Indirect eneficial wnership nstr. 4)	
Reminder:	Report on a	separate line for eac		Derivat	ive S	Securitie	s Ac	Persons in this f displays	s who respo orm are no s a currentl sed of, or Be	t requ y val nefici	uired to re lid OMB c ially Owne	espond ontrol n	unless the	tion contain e form	ed SEC 14	74 (9-02)
1. Title of	l ₂	3. Transaction	3A. Deemed	(<i>e.g.</i> , pu	ts, c	5. Numl		s, options, cor			s) 7. Title and	1	9 Dries of	9. Number of	10.	11. Nature
	Conversion		Execution Date, if	Transaction of Code Deri's (Instr. 8) Secu Acqu (A) of Disp (D) (Instr. 8)		of Derivati Securiti Acquire (A) or Dispose	ive es d	Expiration Date (Month/Day/Year) U		Amount of Underlying		Derivative Security (Instr. 5)		Ownership Form of Derivative Security: Direct (D) or Indirect		
				Code	v	(A)	(D)	Date Exercisable	Expiration I	Date '	Title	Amount or Number of Shares				
Option to purchase Common Stock	\$ 33.60	09/04/2018		A		90,000		09/07/2018	12/31/2020		Alico, Inc., Common Stock, Par Value \$1.00	90,000	\$ 0	103,000 (2	D D	

Reporting Owners

Deporting Owner Name / Address	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Kiernan John E 110 CROTON AVENUE MOUNT KISCO, NY 10549			Executive Vice President & CFO				

Signatures

John E. Kiernan	09/11/2018			
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).
- Represents options granted under the Stock Incentive Plan of 2015. The Option Grants will vest as follows: (i) 25% of the options will vest if the price of the Company's common stock during a consecutive 20-trading period if such price exceeds \$35.00; (ii) 25% of the options will vest during a consecutive 20-trading period if such price exceeds \$40.00; (iii) 25% of the options will vest during a consecutive 20-trading period if such price exceeds \$40.00; (iii) 25% of the options will vest during a consecutive 20-trading period if such price exceeds \$50.00.
- (2) Includes an award of 13,000 shares of restricted stock options pursuant to the reporting person's Employment Agreement. As of September 11, 2018, 5,667 options have vested and 7,333 remain eligible to vest.

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.