FORM 4	4
--------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

02)

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)										
1. Name and Address of Reporting P Sambuco Joseph	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) 10070 DANIELS INTERSTAT	(Middle) TE COURT	3. Date of Earliest 10/04/2018	Transactio	ransaction (Month/Day/Year)				Officer (give title below)	Other (specify b	elow)
(Street) FT MYERS, FL 33913	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)	Tab	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned							
1.Title of Security (Instr. 3)	(Month/Day/Year)	Execution Date, if	Code (Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
Alico, Inc., Common Stock, Par Value \$1.00	10/04/2018		А		835	А	\$ 33.67	10,415	D	
Alico, Inc., Common Stock, Par Value \$1.00								4,000	Ι	By Nancy Lynn Sambuco (1)

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1474 (9-Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5	. Nun	ıber	6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n o	f		and Expirati	on Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	D	Deriva	tive	(Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	S	Securit	ties			Secu	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				А	Acquir	ed			(Instr	. 3 and			Security:	(Instr. 4)
	Security				(/	A) or				4)			Following	Direct (D)	
					Ľ	Dispos	ed						Reported	or Indirect	
					0	f(D)							Transaction(s)	(I)	
						Instr.	-						(Instr. 4)	(Instr. 4)	
					4	, and	5)								
											Amount				
								Date	Expiration		or				
								Exercisable		Title	Number				
								Excicisable	Date		of				
				Code V	/ ((A)	(D)				Shares				

Reporting Owners

Describe Open Name (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Sambuco Joseph 10070 DANIELS INTERSTATE COURT FT MYERS, FL 33913	Х							

Signatures

Joseph Sambuco	10/15/2018
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).

(1) Nancy Lynn Sambuco is the spouse of Mr. Joseph Sambuco.

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, 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.