# FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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

(11IIIt Of Ty	pe Response	5)										I				1
1. Name and Address of Reporting Person *- KRUSEN W ANDREW JR				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) (Middle) C/O FLORIDA BANKS INC., 5210 BELFORD ROAD - SUITE 310				3. Date of Earliest Transaction (Month/Day/Year) 07/02/2019						Office	r (give title belo	ow)	Other (specify	below)		
(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 Person Form filed by More than One Reporting Person						
JACKSONVILLE, FL 32256 (City) (State) (Zip)											ured Disposed of or Beneficially Owned					
Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficiany						6.	7. Nature									
1.Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		Execution Date, if any		if Coo (Ins	Code (Instr. 8)		(A) or Disposed of (D) (Instr. 3, 4 and 5)			Beneficially Owned Following Reported Transaction(s)			Ownership of Form:	of Indirect Beneficial		
			(Month/Day/Year)			Code	v	Amount	(A) or (D)	Price	(Instr. 3 aı	i and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Alico, In Par Value	c., Commo e \$1.00	on Stock,	07/02/2019				A		1,070 (1)	A	\$ 29.81	21,295			D	
Alico, Inc., Common Stock, Par Value \$1.00										1,000		I	By WIT Ventures, LTD (2)			
Reminder:	Report on a s	separate line f	or each class of secu	rities bene	eficially	owned	l direct	Pers	sons wh tained ir	o resp	orm ar	e not requ	ction of inf uired to res OMB con	spond unl	ess	C 1474 (9-02)
				Derivativ					-			lly Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	xercise (Month/Day) e of vative	Transaction 3A. Deemed Execution Da onth/Day/Year) any	4. Transaction Code Year) (Instr. 8)		5. Num of Deri Secu Acq (A)	vative urities uired or bosed D) cr. 3,	6. D and (Mo	Pate Exerc Expiration onth/Day/	cisable on Date	7. T Am Und Sec	ount of derlying arities tr. 3 and Derivative Security (Instr. 5) Benefic Owned Following Reporte Transac		Securities Beneficial	Ownershi Form of Derivative Security: Direct (D or Indirect	Beneficial Ownersh (Instr. 4)  (D)  rect
				C	ode V	(A)	(D)	Date Exe		Expirat Date	ion Titl	Amount or Number of Shares				

## **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
KRUSEN W ANDREW JR C/O FLORIDA BANKS INC. 5210 BELFORD ROAD - SUITE 310 JACKSONVILLE, FL 32256	X					

### **Signatures**

W. Andrew Krusen	07/02/2019
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**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) These share were issued under the Stock Incentive Plan of 2015.
  - On April 30, 2013, WIT Ventures, LTD ("WIT") purchased 1000 shares of the Company's Common Stock. Dominion Financial Group, Inc. ("DFG") is the managing
- (2) general partner of WIT. Mr. Krusen is the President of DFG and has investment authority over shares held by DFG pursuant to a Consulting Agreement between Mr. Krusen and DFG.

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.