FORM 4	ŀ
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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).

(Print or Type Perponses)

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

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

#### 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 Pe Eisner R. Gregory	2. Issuer Name an ALICO, INC. [		or Tra	ading Sym	ıbol		5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
365 WEST END AVE., APT 6	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/01/2021						Officer (give title below)	Other (specify b	elow)	
(Street) NEW YORK, NY 10024	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 Acq					es Acqui	uired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	(Instr. 8)	v	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) (A) or Amount (D) Price		l of (D) 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership	
Alico, Inc., Common Stock, Par Value \$1.00	04/01/2021		А		795 <mark>(1)</mark>	А	\$ 29.51	26,794	D		

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

1

Persons who respond to the collection of information

SEC 1474 (9-02)

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
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(e.g., puts, calls, warrants, options, convertible securities)																	
1. Title of	2.	3. Transaction	3A. Deemed	4.		5.		6. Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature		
Derivative	Conversion	Date	Execution Date, if	Transacti	ion	Numl	ber	and Expirati	on Date	Amou	unt of	Derivative	Derivative	Ownership	of Indirect		
Security	or Exercise	(Month/Day/Year)	any	Code		of		(Month/Day/Year)		(Month/Day/Year)		Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)		Deriv	ative			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership		
	Derivative					Secur				(Instr	. 3 and			Security:	(Instr. 4)		
	Security					Acqu	ired			4)			0	Direct (D)			
						(A) o							1	or Indirect			
						Dispo							Transaction(s)				
						of (D	· · · · · · · · · · · · · · · · · · ·						(Instr. 4)	(Instr. 4)			
						(Instr	· · · ·										
						4, and	15)										
											Amount						
								Date	Expiration		or						
								Exercisable	*	Title	Number						
								Excicisable	Date		of						
				Code	V	(A)	(D)				Shares						

# **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
Eisner R. Gregory 365 WEST END AVE. APT 6A NEW YORK, NY 10024	Х						

### Signatures

R. Gregory Eisner	04/02/2021
**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 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.