## FORM 4

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

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

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	s)															
1. Name and Address of Reporting Person * English Katherine					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) 7951 DENI DRIVE				3. Date of Earliest Transaction (Month/Day/Year) 10/01/2021							Office	r (give title belo	ow)	Other (specify	below)		
(Street)				4. If	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					
NORTH	FORT MY	YERS, FL 3	3917											, a o j 111010 unan	one responding	2010011	
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqui						ired, Disposed of, or Beneficially Owned						
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year	Exec any			(Instr. 8)		4. Securities Acqu (A) or Disposed of (Instr. 3, 4 and 5)			Beneficia Reported	Transaction	f Securities Owned Following ansaction(s)		7. Nature of Indirect Beneficial	
			(Month/Day/Ye		Year)	r) Code		V	Amour	(A) or or (D)	Price	(Instr. 3 a	nstr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Alico, In	c., Commo e \$1.00	on Stock,	10/01/2021					4		546 <sup>(1</sup>	\$		3,902			D	
			Table II					quire	the f	orm di	splays a o	curre: eficial	ntly valid		spond unle trol numbe		
1 Tid 6	12	2	. 24 D					ts, op			tible secur		:41	0 D.: f	0. M	-£ 10	11 Notes
Security	Conversion or Exercise Price of Derivative Security	3. Transactio Date (Month/Day/	Year) Execution D	ate, if	te, if Transaction Code Year) (Instr. 8)		Number ar		and i	Date Exercisable and Expiration Date Month/Day/Year)		Amo Und Secu	itle and bunt of erlying urities tr. 3 and	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owner Form of Deriva Securit Direct or Indi	f Beneficia Ownersh y: (Instr. 4) D)
					Code	v	(A)	(D)	Date Exer	e rcisable	Expiration Date	Title	Amount or Number of Shares				

#### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
English Katherine						
7951 DENI DRIVE	X					
NORTH FORT MYERS, FL 33917						

### **Signatures**

ŀ	Katherine R. English	10/04/2021
*	*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.