## 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

(Print or Ty	pe Response	s)															
1. Name and Address of Reporting Person * TRAFELET REMY W					2. Issuer Name and Ticker or Trading Symbol ALICO INC [ALCO]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director  X 10% Owner				
(Last) (First) (Middle) C/O TRAFELET & COMPANY, LLC					3. Date of Earliest Transaction (Month/Day/Year) 11/25/2019								Office	r (give title belo	ow)	Other (specify l	pelow)
(Street)				4. It	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						
NEW YO	ORK, NY	10022													one responding		
(City) (State) (Zip)					Table I - Non-Derivative Securities Acqu							ired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Y	Execution Execution any	2A. Deemed Execution Date, if any (Month/Day/Year)		(Instr. 8)		(A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficia Reported	nt of Securities Illy Owned Following Transaction(s)		Form:	7. Nature of Indirect Beneficial	
				(Mo				ode	V	Amour	(A) or (D)	Price	(Instr. 3 and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Alico, In	c., Commo e \$1.00	on Stock,	11/25/2019					S		1,412	D S		911,106	5 (1) (2)		D	
			Table					quire	the f	form di	splays a of, or Ben	curre eficial		OMB conf	spond unle trol numbe		
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Security	2. Conversion or Exercise Price of Derivative Security	3. Transactio Date (Month/Day/	Year) Execution	Date, if	te, if Transaction Code ('ear) (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		Amo Und Secu	itle and ount of lerlying urities tr. 3 and		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct ( or Indire	Beneficial Ownership (Instr. 4)	
					Code	V	(A)	(D)	Date Exer	e rcisable	Expiration Date	n Title	Amount or Number of Shares				

### **Reporting Owners**

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
TRAFELET REMY W							
C/O TRAFELET & COMPANY, LLC		X					
NEW YORK, NY 10022							

### **Signatures**

Remy W. Trafelet By: /s/ Remy W. Trafelet	11/26/2019
**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) 106,221 of these shares of Common Stock are held by a limited liability company of which Mr. Trafelet is the sole owner. Mr. Trafelet disclaims beneficial ownership of the shares held by such limited liability company except to the extent of his pecuniary interest therein.
- 162,785 of these shares of Common Stock are held by Delta Offshore Master II, LTD (the "Fund") of which Mr. Trafelet may be considered to be the indirect beneficial owner by virtue of his position with Trafelet Capital Management, L.P. ("TCM"), which serves as investment manager to the Fund and, in such capacity, exercises voting and investment control over securities held for the accounts of the Fund. Mr. Trafelet disclaims beneficial ownership of the Common Stock held by the Fund except to the extent of his pecuniary interest therein.

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.