FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D C	205/19
vvasilliquui,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

washington, D.C.	20548

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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*  Rey Eric J.						2. Issuer Name <b>and</b> Ticker or Trading Symbol Arcadia Biosciences, Inc. [ RKDA ]								Relationship neck all applic	cable)	g Person(s) to	Issuer 6 Owner	
(Last) (First) (Middle) C/O ARCADIA BIOSCIENCES, INC.						3. Date of Earliest Transaction (Month/Day/Year) 03/14/2018								Officer below)	(give title	Oth belo	er (specify ow)	pecify
202 COUSTEAU PLACE, SUITE 105					4.	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable											┪	
(Street)  DAVIS	C.	A	95618											Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person				
(City)	(S	tate)	(Zip)															
		Tak	le I - N	on-Der	ivativ	e Se	curit	ties Ac	quire	d, Di	sposed o	f, or Be	neficial	ly Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Yea		Execution Date,		n Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar			Benefici Owned	s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership	,		
								Code	v	Amount	(A) or (D)	Price	Reporte Transac (Instr. 3	tion(s)		(Instr. 4)		
Common Stock			03/14/2018		3		M		21,005	A	\$21.6	28	,340	D		1		
Common Stock			03/14	03/14/2018				S <sup>(1)</sup>		21,005	D	\$45.209	) <sup>(2)</sup> 7,	335	D			
Common Stock			03/15	/2018				M		250	A	\$44.8	7,	585	D			
Common Stock			03/15	/2018				S <sup>(1)</sup>		250	D	\$60	7,335		D			
			Table II								posed of, convertil			Owned				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security		xercise (Month/Day/Year) e of vative		med on Date, Day/Year)	4. Transaction Code (Instr. 8)		5. Number n of		6. Date Exerc Expiration Da (Month/Day/\)		ate	7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	ship of Indire Benefici (D) Ownersl ect (Instr. 4)	Beneficial Ownership ct (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (right to buy)	\$21.6	03/14/2018			М			21,005	(3)	)	06/30/2018	Common Stock	21,005	\$0.00	35,969	) D		
Employee Stock Option (right to buy)	\$44.88	03/15/2018			М			250	(3)	)	11/01/2019	Common Stock	250	\$0.00	35,719	) D		

## **Explanation of Responses:**

- 1. The security transactions reported in this Form 4 were effected pursuant to a Rule 10b5-1 Stock Trading Plan adopted by the Reporting Person effective June 6, 2017.
- 2. This transaction was executed in multiple trades at prices ranging from \$38.00 to \$49.80. The price reported above reflects the weighted average sale price. The Reporting Person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 3. The option is fully exercisable as of the date hereof.

## Remarks:

Eric Rey, by Attorney-in-fact, Pam Haley

03/16/2018

\*\* Signature of Reporting Person

Date

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

- \* 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.