FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

or Section 30(h) of the Investment Company Act of 1940

**OMB APPROVAL** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

OMB Number: 3235-028								
Estimated average burden								
hours per response:	0.5							

Name and Address of Reporting Person*     Plavan Matthew T						2. Issuer Name and Ticker or Trading Symbol Arcadia Biosciences, Inc. [ RKDA ]									Check a	all app Direc	olicable)	g Person(s) to Issue 10% Owne Other (spe		wner	
(Last) (First) (Middle) C/O ARCADIA BIOSCIENCES, INC. 202 COUSTEAU PLACE, SUITE 105						3. Date of Earliest Transaction (Month/Day/Year) 09/23/2019									X	below)  Chief Executiv			below)		
(Street) DAVIS CA 95618  (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
		Tabl	e I - Nor	า-Deriv	ative	Se	curitie	s Acc	uired,	Dis	posed o	f, or	Ben	efici	ally O	)wne	ed				
1. Title of Security (Instr. 3)  2. Transa Date (Month/Date)						ar)   E	A. Deemed Execution Date, f any Month/Day/Year)		Code (	Transaction Disposed Code (Instr. 5)					4 and Se Be Ov		i. Amount of Securities Beneficially Dwned Following		nership Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount		(A) or (D)	Price	,  ı	Reported Transaction(s) (Instr. 3 and 4)				(111501.4)	
Common Stock 09/23/					9/23/2019						2,000	0 A S		\$5.	.25	12,000			D		
		Та									sed of, onvertib					ned					
1. Title of Derivative Security (Instr. 3)	vative urity or Exercise r. 3)  Dete (Month/Day/Year)  Derivative Security  Date (Month/Day/Year)  (Month/Day/Year)  Execution Date, if any (Month/Day/Year)  Month/Day/Year)  8			Code ( 8)	Fransaction of Code (Instr. Deriva			6. Date Expiration (Month/D	n Date	Amount of			ount nber	nt er		9. Number of derivative Securities Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ov Fo Dii or (I)	wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

**Explanation of Responses:** 

Remarks:

Matthew T. Plavan, by Attorney-in-Fact, Pam Haley

09/23/2019

\*\* 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.