FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIA	AL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Knauf Vic C.				2. Issuer Name and Ticker or Trading Symbol Arcadia Biosciences, Inc. [RKDA]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)								
			Ar										•	Neck all applicable) X Director			10% Owner				
ļ														X	Officer (give title			Other (specify		
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year)									Λ	below)			below)			
C/O ARCADIA BIOSCIENCES, INC.			03/	03/03/2016									Chief Scientific Officer								
202 COUSTEAU PLACE, SUITE 105			\vdash																		
					- 4. I1	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) DAVIS	C	Δ	95618												X	Form f	iled by One	e Rep	orting Perso	on	
	CA 95618										Form filed by More than One Reporting										
(City)	(S	tate)	(Zip)													Persor	1				
		Tah	le I - Nor	n-Deriv	ztive	- Sc	Curit	ies Ac	auiro	ı Di	enne	sed o	f or Re	nefic	ially	Owner	1				
1 Title of	Socurity (Inc		IC 1 - NOI	2. Trans		_			3.	ו, טו	<u> </u>		-			5. Amou		6.0	wnership	7. Nature	
D			Date			2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Code (Instr. 5		n Di:	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			l and Securiti Benefic Owned		es ally Following	Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)			
									Cod	e v	Ar	mount	(A) o (D)	r Pric	e	Reporte Transac (Instr. 3	tion(s)			(instr. 4)	
Common Stock				03/03	3/2016	2016			M ⁽¹			300	A	\$1	1.08	47,434			D		
Common Stock			03/03	3/2016				S ⁽¹⁾			300	D	\$2	2.97	7 47,134			D			
Common Stock			03/04	1/2016				M ⁽¹			2,973	A	\$1	1.08	8 50,107			D			
Common Stock (03/04	4/2016	/2016			S ⁽¹⁾			2,973	D	\$3	.224	24 47,134			D			
		T	able II -										or Ber			Owned					
1. Title of	2.	3. Transaction	3A. Deeme	· · · ·	4.	Can	<u> </u>						7. Title ar			. Price of	9. Number	r of	10.	11. Nature	
Derivative Conversion or Exercise Price of Derivative Security (Instr. 3) Security (Month/Day/Year) Security Security Security Security Security Security				Date,	Transaction Code (Instr. 8)		n of E		Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Secur (Instr. 3 and 4)		Derivative Security (Instr. 5)		derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
														Amou							
					Code	v	(A)	(D)	Date Exercis	able	Expir Date	ration	Title	Numb of Share							
Employee Stock Option (right to buy)	\$1.08	03/03/2016			М			300	(2)		06/30	0/2018	Common Stock	300		\$0.00	235,53	4	D		
Employee Stock Option	\$1.08	03/04/2016			M			2.973	(2)		06/30	0/2018	Common	2.97	3	\$0.00	232.56	1	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 February 1, 2016.
- 2. The option is fully exercisable as of the date hereof.

Remarks:

(right to buy)

> Vic C. Knauf by Attorney in 03/07/2016 Fact, Wendy S. Neal

Stock

** 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.