FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| l | OMB APPRO | VAL | | | |
|---|-------------------------|-----------|--|--|--|
| | OMB Number: | 3235-0287 | | | |
| l | Estimated average burde | en | | | |
| l | hours per response: | 0.5 | | | |

| | Check this box if no longer subject to | | | | | | | | | |
|--------|--|--|--|--|--|--|--|--|--|--|
| \neg | 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

| | nd Address of lis Ronal | | 2. Issuer Name and Ticker or Trading Symbol Limoneira CO [LMNR] | | | | | | | | | tionship of Reporting F all applicable) Director | | Person(s) to Issuer 10% Owner | | | | |
|--|---|--|--|-------------------------------------|---|---|---|------|---|-----------------------------------|------------------------|---|--|--|---|---|---|--|
| (Last) (First) (Middle) 1141 CUMMINGS ROAD | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 10/05/2010 | | | | | | | | | Office | er (give title w) | Other below | (specify) |
| (Street) SANTA | PAULA CA | | 93060 (Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indivi Line) X | ridual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | | Tab | le I - 1 | Non-Deriv | <i>r</i> ative | Sec | uritie | s Ac | quir | ed, Di | sposed o | f, or E | Benefic | ially (| Dwne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye | | | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) | | | | | 5. Amount of Securities Beneficially Owned Follow Reported | | ities icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | | Trans | action(s) 3 and 4) | | (111501.4) | | |
| Common | Stock | | 10/05/2010 s 2,957 D \$19 366,446 I | | | | | | | By Trust | | | | | | | | |
| Common | Stock | | | 10/06/2 | 010 | | | | S | | 5,506 | D | \$19.09 |)22 ⁽¹⁾ | 3 | By Trust | | |
| | | Та | able II | | | | | | | | oosed of, convertib | | | | ned | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu | eemed ution Date, h/Day/Year) | 4. Transaction Code (Instr. 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expi | ate Exerc ration D nth/Day/ | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | | vative urity ir. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exer | cisable | Expiration Date | Title | Amount or Number of Shares | | | | | |

Explanation of Responses:

1. The sales price reported in this Form 4 was between the range of \$19.00 per share to \$19.49 per share. Full information regarding the number of shares sold at each separate price will be provided upon request by the SEC staff, the issuer, or any security holder of the issuer.

/s/ Ronald L. Michaelis 10/07/2010

** 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.