FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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The string configuration of th	OMB APP	ROVAL
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-

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

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average bur	den									
hours per response:	0.5									

1. Name and	2. Issuer Name and Ticker or Trading Symbol HOVNANIAN ENTERPRISES INC [HOV							(Che	ck all applic	ctor er (give title		son(s) to Iss 10% Ow Other (s	mer						
(Last) (First) (Middle) C/O HOVNANIAN ENTERPRISES, INC.						3. Date of Earliest Transaction (Month/Day/Year) 06/09/2023								X	below)	below)	peony		
90 MATAWAN ROAD						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) MATAWAN NJ 07747														X	X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State) (Zip)						Rule 10b5-1(c) Transaction Indication													
					C	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													
		Table	ative S	Seci	urities	s Ac	quired, I	Disp	osed o	of, or B	ene	ficially	y Owned						
1. Title of Se	etion 2A. Deemed Execution Date if any (Month/Day/Year)			Date,	Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			5. Amou Securition Benefici Owned I Reporte	es Fo ially (D) Following (I)		n: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
						Code V Amount (A) or Pri		Price	Transac	Transaction(s) (Instr. 3 and 4)									
Class A Common Stock 06/12/2									F		862	I)	\$97.09	97.09 10,861			D	
		ive Se uts, ca	ecur alls,	rities . warra	Acq ants	uired, Di , option	spo s, c	sed of onverti	, or Be ble sec	nefi curit	cially ties)	Owned							
1. Title of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, or Exercise (Month/Day/Year) if any			Transaction of Code (Instr. 8) Se Ac (A) Dis		of I		6. Date Exercisable an Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	or Nu of	ımber					
Performance Share Units (2023)	(1)	06/09/2023			A		2,882		(2)		(2)	Class A Common Stock	2,	882 ⁽³⁾	\$0.0000	2,882		D	

Explanation of Responses:

- $1.\ Vested\ Performance\ Share\ Units\ convert\ into\ Class\ A\ Common\ Stock,\ par\ value\ \$.01\ per\ share,\ non-cumulative\ ("Class\ A\ Common\ Stock"),\ on\ a\ one-for-one\ basis.$
- 2. These Performance Share Units vest based on satisfaction of service vesting conditions through June 9, 2026 to the extent of the achievement of specified performance criteria over a performance period ending on April 30, 2024 and, to the extent vested, settle in shares of Class A Common Stock on June 9, 2028.
- 3. The number of shares of Class A Common Stock that would be received upon vesting of the Performance Share Units will vary from 50% to 200% of the number shown depending on the achievement of certain performance criteria during the relevant performance period.

Elizabeth D. Tice Attorney-in-

** Signature of Reporting Person

Fact

06/13/2023

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.