[

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

EMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		
	Estimated average burden			
Filed purcurant to Section 16(a) of the Securities Evaluates Act of 1024	hours per response:	0.5		

	tion 1(b).	lue. See		Filed							ies Exchanç npany Act c		1934		hours	s per r	esponse:	0.5
1. Name and Address of Reporting Person [*] O'Connor Brad G					2. Issuer Name and Ticker or Trading Symbol HOVNANIAN ENTERPRISES INC [HOV]									Check all a Di X Of	tionship of Reportin all applicable) Director Officer (give title below)		10% O	wner (specify
(Last) (First) (Middle) 90 MATAWAN ROAD, FIFTH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 06/09/2020										SVP, CAO and Treasurer			
(Street) MATAW (City)		-	7747 Zip)		4. If A	mend	ment, Da	ate of	f Origina	al Fileo	d (Month/Da	ay/Year)		ine) X Fo Fo	or Joint/Grou rm filed by Or rm filed by Mo rson	ne Re	porting Pers	on
		Table	I - No	n-Deriva	tive S	Secu	rities A	Acq	uired,	Dis	posed of	f, or B	enefic	ially Ov	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execution Date,		,	Transaction Disposed (Code (Instr. 5)		es Acquired (A) o Of (D) (Instr. 3, 4		Ind Sec Ben Owr	nount of Irities eficially ed Following orted	For (D)	Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) o (D)	r Price	Trar	saction(s) r. 3 and 4)	action(s)		(1130.4)
Class A Common Stock 06/09/2					2020			F		17	D	\$27	.66	3,722		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	on Date,	4. Transa Code (I 8)		5. Num of Derivat Securit Acquire (A) or Dispos of (D) (Instr. 3 and 5)	tive ties red	6. Date Expirati (Month/	ion Da		3 and 4	nt of ties ying tive ty (Instr.	8. Price Derivativ Security (Instr. 5)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Date Exercisable

Explanation of Responses:

Nancy A. Marrazzo Attorney-06/11/2020

of

Shares

Title

<u>in-Fact</u>

Expiration Date

** 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).

Code V

(A) (D)

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.