FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| wasiiiigton, | D.C. | 2054 |
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| OMB APPROVAL | | | | | | | | | |
|-------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average | hurdon | | | | | | | | |

0.5

hours per response:

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

| 1. Name and Address of Reporting Person* REINHART PETER S | | | | | | 2. Issuer Name and Ticker or Trading Symbol HOVNANIAN ENTERPRISES INC [HOV] | | | | | | | | | eck all app Direc | olicable) | g Person(s) to Is 10% (| |
|--|---|------|--|---|--|---|---------|-----------|--|-----------|---|----------|-------------------------|---|----------------------------------|---|--|-----|
| (Last) (First) (Middle) 110 WEST FRONT STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 06/08/2011 | | | | | | | | | helo | N) . | below neral Counsel |)`` |
| (Street) RED BA (City) | | | 07701 Zip) | | 4. If Amendment, Date of Original Filed (N | | | | | (Month/Da | ay/Year) |) | Line | e) <mark>X</mark> Forn | n filed by One n filed by Moi | o Filing (Check A e Reporting Pers re than One Rep | son | |
| | | Tabl | e I - Nor | -Deriv | ative | Sec | curitie | s Ac | quired, | Dis | posed o | f, or I | 3ene | ficial | ly Own | ed | | |
| | | | 2. Transaction Date (Month/Day/Year) | | ar) E | 2A. Deemed Execution Date, if any (Month/Day/Year) | | Code (| Transaction Disposed (Code (Instr. 5) | | | | | Secur Benef Owner | ities icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A (D |) or) | Price | Transa | ported (Instr. 4) nsaction(s) str. 3 and 4) | | |
| Class A C | Class A Common Stock | | | 06/08 | /2011 | 2011 | | F | | 363 D | | \$2.0 | 7 59,273 | | D | | | |
| | | Та | ble II - D | | | | | | | | sed of, onvertib | | | | Owned | | | |
| 1. Title of Derivative Security (Instr. 3) | erivative Conversion Date Execution Date curity or Exercise (Month/Day/Year) if any | | Date, | 4. Transaction Code (Instr. 8) | | n of | | Expiratio | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | tr. 3 | . Price of Derivative Gecurity Instr. 5) | | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisal | | Expiration Date | Title | or Num of Shar | ber | | | | |

Explanation of Responses:

Nancy A. Marrazzo Attorneyin-Fact

06/10/2011

** 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.