FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
- 1	hours ner resnonse.	0.5								

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*				2. Issuer Name and Ticker or Trading Symbol HOVNANIAN ENTERPRISES INC [HOV]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>HOVNANIAN ARA K</u>					ino ; in								X	Director		X	10% Ow	ner	
(Last) (First) (Middle)					Date of Earliest Transaction (Month/Day/Year)							X	Officer (below)	give title		Other (s below)	pecify		
110 WEST FRONT STREET					06/13/2014								Chairn	Chairman of Bd., Pr					
(Street)				— 4	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi	Individual or Joint/Group Filing (Check Applicable							
RED BA	NK N	J	07701								X	Form filed by One Reporting Person							
(City)	(S	tate)	(Zip)	-									Form filed by More than One Reporting Person				ng		
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/L			е	action 2A. Deemed Execution Date if any (Month/Day/Year)		e, Transaction Dispose Code (Instr.			ırities Acquired (A) or ed Of (D) (Instr. 3, 4 and			5. Amount Securities Beneficial Owned Fo	Form		Direct I Indirect E tr. 4)	7. Nature of ndirect Beneficial Ownership			
								G	Code V	V Amount		(A) (D)	or Pr	Price Reported Transacti (Instr. 3 a		ion(s)			nstr. 4)
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Conversion Date Security or Exercise (Month/Day/Year) if any			ransaction ode (Instr.) Secu Acqu or Di of (D		Derivative Ex		. Date Exercisable and xpiration Date Month/Day/Year)		and	7. Title and Amoun Securities Underly Derivative Security (Instr. 3 and 4)		ying Derivative		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				Code	v	(A)	(D)	Date Exerc	cisable	Expiration Date		Amou Numb Title Share		er of		(Instr. 4)			
Market Share Units	(1)	06/13/2014		A		300,000			(2)	06/13/	3/2019	Class A Common Stock ⁽³⁾	300,0	000(4)	\$0.0000	300,00	00	D	

Explanation of Responses:

- 1. Converts to Class A Common Stock, par value \$.01 per share, non-cumulative ("Class A Common Stock"), on a one-for-one basis
- 2. The Market Share Units vest, if at all and to the extent of specified market performance of the Class A Common Stock over each relevant vesting period, in four equal installments beginning on June 13, 2016
- 3. Upon, and to the extent of, vesting of the Market Share Units, shares of Class B Common Stock, par value \$.01 per share, non-cumulative ("Class B Common Stock"), would be received. Shares of Class B Common Stock are immediately convertible into an equal number of shares of Class A Common Stock.
- 4. The number of shares of Class B Common Stock that would be received upon vesting of the Market Share Units, if any, may vary from 50% to 175% of the number shown depending on the market performance of the Class A Common Stock over each relevant vesting period

Nancy A. Marrazzo Attorneyin-Fact

06/17/2014

** 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.