FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
nstruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

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* SORSBY J LARRY						2. Issuer Name and Ticker or Trading Symbol HOVNANIAN ENTERPRISES INC HOV						X Directo	able) r	Person(s) to Is	wner	
(Last) (First) (Middle) 10 HIGHWAY 35				3. Date of Earliest Transaction (Month/Day/Year) 01/01/2006							X Officer (give title Other (specify below) Exec. VP and CFO					
(Street) RED BANK NJ 07701 (City) (State) (Zip)					4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tal	ole I - Non-	-Deriva	tive S	Securiti	es Ac	quired, Di	sposed o	f, or Ber	eficial	ly Owned				
Date			2. Transac Date (Month/Da		2A. Dee Execution if any (Month/		Transaction Disposed Code (Instr. 5)		ties Acquired (A) or I Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Ownerfollowing		. Ownership form: Direct D) or Indirect) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
							Code V	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)		
			Table II - D					uired, Dis , options,				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Co	nsactio			6. Date Exer Expiration D (Month/Day/	ate	Amount of		8. Price of Derivative Security (Instr. 5)	derivative Securities Beneficially Owned Following Reported	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
				Co	de V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		Transaction (Instr. 4)	i(s)		
Phantom Stock Units	(1)	01/01/2006		Г			3,694	(2)	(3)	Class A Common Stock	3,694	(4)	11,082 ⁽⁵⁾	D		
Phantom Stock Units	(1)	01/01/2006		Г			5,694	(6)	(7)	Class A Common Stock	5,694	(4)	17,078 ⁽⁸⁾	D		
Phantom Stock Units	(1)	01/01/2006		A		9,388		(9)	(9)	Class A Common Stock	9,388	(4)	9,388	D		

Explanation of Responses:

- 1. 1-for-1
- 2. Original grant vests in 25% increments beginning on November 1, 2000
- 3. Distribution must be made as soon as practicable after vesting unless the reporting person has previously elected to defer such distributions
- 4. Not applicable
- 5. On March 19, 2004, the common stock of Hovnanian Enterprises, Inc. split 2-for-1, resulting in 7,388 additional Phantom Stock Units held by the reporting person
- 6. Original grant vests in 25% increments beginning on November 1, 2001
- 7. Payout to be made on January 1, 2006 or upon the occurrence of certain other events set forth under the terms of Deferred Compensation Plan
- 8. On March 19, 2004, the common stock of Hovnanian Enterprises, Inc. split 2-for-1, resulting in 11,386 additional Phantom Stock Units held by the reporting person
- 9. Payout to be made on January 1, 2009 or upon the occurrence of certain other events set forth under the terms of Deferred Compensation Plan

Remarks:

Nancy A. Marrazzo, Attorneyin-Fact

** 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.