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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-02										
Estimated average burden										
hours per response	. 05									

	ction 1(b).	nuc. See		Filed							ties Exchang mpany Act o		1934			llours	peri	esponse:	0.5
1. Name and Address of Reporting Person* PAGANO VINCENT JR					2. Issuer Name and Ticker or Trading Symbol HOVNANIAN ENTERPRISES INC HOV										all applicable) Director		ing Person(s) to Is		wner
(Last) (First) (Middle) 90 MATAWAN ROAD, FIFTH FLOOR					3. Date of Earliest Transaction (Month/Day/Year) 06/12/2020										below	er (give title v)		Other (: below)	specily
(Street) MATAWAN NJ 07747 (City) (State) (Zip)						Amend	ment,	Date o	of Origin	al File	d (Month/Da	y/Year)		Indivi	Form	filed by On	e Re _l	ng (Check A porting Pers an One Rep	on
		Table	I - No	n-Deriva	ative S	Secu	rities	Acc	uired	, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4) 5)				4 and Secur Benef		rities F ficially (ed Following (m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) or (D)	Price	I.	Transaction(s) (Instr. 3 and 4)				(111501. 4)	
Class A Common Stock 06/12/2					2020		A		6,949	A	\$0.0	3000 3		4,071		D			
		Tal	ble II -								osed of, convertib				wne	d			
1. Title of Derivative Security (Instr. 3)	Derivative Conversion Date Execution Date, Security or Exercise (Month/Day/Year) if any					Transaction Code (Instr. 8) Sec Acq (A) Dis		osed) r. 3, 4	6. Date Expira (Month	tion D		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Deriv Secu		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	l _v	(A)	(D)	Date Exerci	sable	Expiration Date		Number of Shares						

Explanation of Responses:

Nancy A. Marrazzo Attorney- 06/16/2020 in-Fact

** Signature of Reporting Person

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.