SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

| Check this bo Section 16. Fo | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP | | | | | | | | | | HIP | | hours per response: 0.5 | | | | | | |
|--|--|--|--|------------|--|------------------------|--------|--|-----------|---|---------------|--|--|--|------------|--|--|--|--|
| obligations ma | | . See | | | | | | | | | | | | | | | | | |
| | | | | | Filed p | | | | | | | change Ac | | 4 | | | | | |
| | | | | | | or Se | ection | 30(h) of | f the Inv | vestment | Compan | y Act of 19 | 40 | | | | | | |
| Check this bo transaction wa contract, instri- the purchase of the issuer ti the affirmative Rule 10b5-1(c | as made pu uction or wr or sale of eo nat is intend defense co | rsuant to a ritten plan for quity securities ded to satisfy pnditions of | | | | | | | | | | | | | | | | | |
| 1. Name and Address | of Report | ting Person [*] | | 2. Issu | er Name | e and | Ticker | or Trac | ding Syr | mbol | | | | | | rson(s) to Issu | er | | |
| BIGBEE PAUL | | | | CAVC | CAVCO INDUSTRIES, INC. [CVCO] | | | | | | | | | (Check all applicable) Director 10% Owner | | | | | |
| | | | | 3. Date | 3. Date of Earliest Transaction (Month/Day/Year) | | | | | | | | Director 10% Owner X Officer (give title below) Other (specify below) | | | | | ify helow) | |
| | | | | 06/12/2025 | | | | | | | | Chief Accounting Officer | | | | | | | |
| C/O 3636 N. CENTR | AL AVEN | NUE | | | | | | | | | | | | | 0 | | | | |
| SUITE 1200 | | | | 4. If Ar | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) | | | | | | | | | | | | | X | | • | eporting Person | | | |
| PHOENIX | | AZ | 85012 | | | | | | | | | | | Form filed | by More th | nan One Repor | rting Persor | 1 | |
| (City) | | | (Zip) | | | | | | | | | | | | | | | | |
| | | (Oldic) | (1) | | Denin | | 0 | | | | | (D | 6 - 1 - 11 - 1 | 0 | | | | | |
| | | | r | | | ative | | | • | | | f, or Bene | ficially | | | 1. | 1 | | |
| 1. Title of Security (Instr. 3) | | 2. Transaction Date (Month/Day/Year) | 2A. Deem Executior if any (Month/Da | n Date, | 3. Transa Code (Instr. 8 | ansaction (li | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | | | | 5. Amount of Securitie Beneficially Owned Following Reported Transaction(s) | | Ownership Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | | Am | ount | | (A) or (D) | Pric | e | — (Instr. 3 and 4) | | or Indirect (I) (Instr. 4) | | | |
| Common Stock | ommon Stock 06/12/2025 | | | | F | | 26 (1) | | | D | \$ 415.94 | | 1,374 | (2) | D | | | | |
| | | | Tal | | | | | | | | | or Benefic le securit | | wned | | | | | |
| 1. Title of Derivative Security (Instr. 3) Exercise Price of Derivar Securit | | r Date E tise (Month/Day/Year) if of (Mative | | Deemed | te, 4. C | 4. Transact Code | | Securities | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amo Securities Under Derivative Secur | | rlying of Deriva | | 9. Number of derivative Securities Beneficially Owned Following Reported | 10. Owne rship Form: Direct (D) or Indirect (I) (Instr. | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | С | ode | v | (A) | (D) | Date E ercisat e | | | le | Amount or Number of Shares | | Transaction (s) (Instr. 4) | 4) | | |

Explanation of Responses:

- 1. Surrender of shares for payment of tax withholding on release of Restricted Stock Units.
- 2. Includes 461 shares underlying Restricted Stock Units allocated but not yet vested or delivered.

Remarks:

| /s/ Seth G. Schuknecht, attorney-in fact | 06/13/2025 |
|--|------------|
| ** 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.