## 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 Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL

OMB Number:

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3235-0287

1. Name and Address of Reporting Person* HANNA JACK						2. Issuer Name <b>and</b> Ticker or Trading Symbol CAVCO INDUSTRIES, INC. [ CVCO ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner					
(Last) (First) (Middle) 1001 N. CENTRAL AVENUE SUITE 800					3. Date of Earliest Transaction (Month/Day/Year) 03/15/2016								Officer (give title Other (specify below) below)				r (specify		
(Street) PHOENIX	AZ 85004					4. If Amendment, Date of Original Filed (Month/Day/Year)     6. Individual or Joint/Group Filing (Check Ap Line)     X Form filed by One Reporting Person											son		
(City)	(State)	(Zi		Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially										Form filed by More than One Reporting Person					
				l able I - N	Non-I			es Acq	uirea	, Dispo	sea ot, o	r Benefici	ally Owr	nea				_	
1. Title of Security (Instr. 3)					2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		Dis	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar 5)				5. Amount of Securities Beneficially Owned Following		Ownership m: Direct or irect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	А	mount	(A) or (D)	Price	Re Tr	eported ransaction(s nstr. 3 and	s) .	tr. 4)	(msu. 4)	
Common Stock						03/15/2016		S	S 500 D \$8		\$86.542 (1)	2	843		D				
Common Stock						08/26/2016		М	М		2,500		\$37.08		3,343		D		
Common Stock						08/26/2016		F (2)	F <sup>(2)</sup> 879		D	\$105.40	)	2,464		D			
				Table II		erivative Se g., puts, ca								d					
1. Title of Derivativ Security (Instr. 3)		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		Deriva Secur Acqui or Dis (D) (Ir	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Day (Month/Day)		Securities Underlying			tr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	D	ate	Expiration	Title		Num	nount or umber Shares					

## **Explanation of Responses:**

- 1. The Price in Column 4 is a weighted average price.
- 2. Represents a "net exercise" of outstanding stock options. Mr. Hanna received 1,621 shares of common stock on a net exercise of option to purchase 2,500 shares of common stock. Mr. Hanna forfeited 879 shares of common stock underlying the option in payment of the exercise price and tax withholding requirements, using the closing stock price on August 25, 2016 of \$105.40.
- 3. The option vested 25% on each of the following dates: September 22, 2009; September 22, 2010; September 22, 2011; and September 22, 2012.

/s/ James P. Glew attorney-in-fact for Jack Hanna 08/30/2016

\*\* 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.