SEC Form 4															
FORM 4	UNITED STA					GE C	OMMIS	SION	OMB APPROVAL						
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STATEME		U			_ ow	NERS		timated average burden						
	File						34								
Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c) See Instruction 10.															
1. Name and Address of Reporting Person [*]		Washington, D.C. 20549 OME Number: 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 Issuer Name and Ticker or Trading Symbol AVCO INDUSTRIES, INC. [CVCO] Date of Earliest Transaction (Month/Day/Year) //31/2023 If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person VOE Derivative Securities Acquired, Disposed of, or Beneficially Owned On Date any (Month/Day/Year) 1. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 5. Amount of Scurities Scarities (I) (Instr. 4)													
GREENBLATT DAVID A.	CAVCO) INDUSTRIES.	<u>, INC.</u> [CVC	CO]	`									
(Last) (First) (Middle) 3636 N. CENTRAL AVENUE	3. Date of E 07/31/202	· · ·	nth/Day/Yea	ar)			()ther (specify below)								
Suite 1200	4. If Amend	lment, Date of Original F	iled (Month	n/Day/	Year)	6. In	dividual or	Joint/Group Filing (C	heck Applicable L	ine)					
(Street)								, ,	0						
PHOENIX AZ 85012							Form	i filed by More than C	one Reporting Per	son					
(City) (State) (Zip)															
Tab	le I - Non-Derivat	ive Securities Ac	quired,	Disp	oosed of, o	r Ben	eficially	Owned							
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any			Disposed Of			Securities Beneficially	Form: Direct (D) or Indirect	Indirect Beneficial					
		(wonth/Day/Year)	Code	v	Amount		Price	Reported Transaction(s)	(i) (instr. 4)						
Common Stock	07/31/2023		Α		400 (1)	Α	\$ 0.00	15,000 (2)	D						

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. This is an award of Restricted Stock Units which will pay out into shares of Common Stock of the Company upon: (a) the 12 month anniversary of the Grant Date, or (b) the Company's next annual meeting of stockholders following the Grant Date, whichever occurs first.

2. Includes 2,550 shares of Restricted Stock Units allocated but not yet vested or delivered.

Remarks:

/s/ Mickey R. Dragash, attorney-in-fact

08/02/2023

** 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.