FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGI	ES IN BENEFICIAL	. OWNERSHIP

OMB APPROVAL OMB Number: 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* <u>Carbone Egidio</u>						2. Issuer Name and Ticker or Trading Symbol CALAVO GROWERS INC [ CVGW ]									Relationshi neck all app X Direc	olicable)	ng Person(s) to Is 10% O		
(Last) 1141A C	(i UMMING	irst) S ROAD	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 01/04/2017										Officer (give title below)		Other ( elow)	(specify
(Street) SANTA PAULA CA 93060 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Lin	ndividual or Joint/Group Filing (Check Applicable c)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tal	ole I - Noi	า-Deriv	ative	Sec	curitie	s Ac	quired	Dis	posed o	f, or E	3ene	ficia	ly Own	ed			
1. Title of Security (Instr. 3)  2. Transa Date (Month/Date)					Execution Date,			3. Transaction Code (Instr. 8) 4. Securit Disposed 5)					d Securi Benefi	cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A (D	) or )	Price	Transa	action(s) 3 and 4)			(mourly)
Common Stock 01/04				4/2017	/2017		A		1,750		A	\$0	2	21,304					
		7	able II - I (								sed of, onvertib				Owned				
1. Title of Derivative Security (Instr. 3)	vative Conversion Date urity or Exercise (Mor		3. Transaction Date (Month/Day/Year)  (Month/Day/Year)			Transaction Code (Instr.				6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	Code V (A) (D		(D)	Date Expir Exercisable Date			Title	Shar	es					

**Explanation of Responses:** 

/s/ Egidio Carbone

01/04/2017

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.