FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-028							
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0.5

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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. Name and Address of Reporting Person*  AHMER ALAN C				2. Issuer Name and Ticker or Trading Symbol CALAVO GROWERS INC [ CVGW ]							Check all ap	ionship of Reporting Person all applicable)  Director			suer		
(Last) 1141A C	(Fi	· ·	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 01/27/2014								A belo	,	Other (specify below)  1. Sales & Prod.		
Street) SANTA I	PAULA CA		93036 Zip)		4. If Am	endment, Date o	of Original	Filed	(Month/Da	ay/Ye	ear)		ne) X For	or Joint/Group m filed by On m filed by Mo son	e Reportii	ng Pers	on
		Tabl	e I - Nor	-Deriv	ative Se	ecurities Acc	quired,	Disp	osed o	f, o	r Ben	eficia	ally Own	ed			
. Title of Security (Instr. 3)  2. Transa Date (Month/Date)				2A. Deemed Execution Date, if any (Month/Day/Year	Transaction Code (Instr.						nd Secur Bene Owne Repo	5. Amount of Securities Beneficially Owned Following Reported		rship irect direct 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							Code	v	Amount		(A) or (D)	Price		action(s) 3 and 4)			
Common Stock 01/27/				7/2014		A		1,454	1	A	\$	\$0 6,87		D			
		Та				urities Acqu s, warrants,							y Owned	I			
Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transactio Code (Inst 8)		Expiration Date (Month/Day/Yea ecurities cquired 4) or isposed f (f) nstr. 3, 4			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)	vative derivative urity Securities		ership n: ct (D) direct nstr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			

Date Exercisable Expiration Date

Explanation of Responses:

/s/ Linda S. Huff by Power of Attorney

Amount or Number

of Shares

Title

01/29/2014

Date

\*\* Signature of Reporting Person

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

- $^{\ast}$  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).

Code

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.

(D)

(A)