FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	ROVAL
OMB Number:	3235-0287
Estimated average	burden
hours per response	: 0.5

	ction 1(b).	ide. Gee		Filed							es Exchang npany Act o		1934		liours	s per resp	ponse:	0.5
1. Name and Address of Reporting Person* Edwards Harold S					2. Issuer Name and Ticker or Trading Symbol CALAVO GROWERS INC [CVGW]									Relationshi Check all app X Direc	ector 10% icer (give title Othe		on(s) to Is	
(Last) (First) (Middle) 1141-A CUMMINGS ROAD				3. Date of Earliest Transaction (Month/Day/Year) 11/01/2020									Offic belov	Other (specify below)				
(Street) SANTA PAULA (City)	CA (St		3060 Zip)		4. If A	Amend	ment,	Date o	f Origina	l Filed	I (Month/Da	y/Year)			n filed by On	ie Repor	rting Perso	on
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	Dis	osed of	, or Be	nefic	ially Own	ed			
Date				2. Transa Date (Month/Da	Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)				ies Acquired (<i>f</i> Of (D) (Instr. 3		and Securi Benefi Owned	Amount of ecurities eneficially wned Following		Direct Indirect tr. 4)	7. Nature of Indirect Beneficial Ownership	
										v	Amount	(A) or Price			ted action(s) 3 and 4)			(Instr. 4)
Common Stock 11/			11/01/	/2020		A		1,500	A	\$	7,438]	D				
		Tal									osed of, o			lly Owne s)	d		,	
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any		n Date,		Transaction of Code (Instr. Derivative		Expirati	6. Date Exercisable and Expiration Date (Month/Day/Year)		e and 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	ly O Fo O (I)	0. Dwnership orm: irect (D) r Indirect) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date		lumber f					

Explanation of Responses:

/s/ Harold S. Edwards

11/02/2020

** Signature of Reporting Person

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.