## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-028							
Estimated average burden							
hours per response	. 0.5						

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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Leison			2. Issuer Name and Ticker or Trading Symbol	5. Relationship of Reporting Person(s) to Issuer					
			Aveanna Healthcare Holdings, Inc. [ AVAH	(Cneci	k all applicable) Director	10% Owner			
100 AVEANNA HEALTHCARE HOLDINGS INC. 400 INTERSTATE NORTH PARKWAY SE		(Middle)	_ ] ]	X	Officer (give title below)	Other (specify below)			
		( )	3. Date of Earliest Transaction (Month/Day/Year) 02/14/2023	1	Chief Complian	ce Officer			
		I PARKWAY SE	4. If Amendment, Date of Original Filed (Month/Day/Year)		6. Individual or Joint/Group Filing (Check App				
			_	Line)	Form filed by One Re	porting Person			
ATLANTA	GA	30339	_		Form filed by More th Person	an One Reporting			
(City)	(State)	(Zip)							
		Table I - Non-Deriv	vative Securities Acquired, Disposed of, or Bene	ficially	/ Owned				

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		Disposed Of	Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1130.4)
Common Stock, par value \$0.01 per share	02/14/2023		Α		58,594	Α	<b>\$0.00</b> <sup>(1)</sup>	185,465 <sup>(2)</sup>	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	(e.g., puts, cans, warrants, options, convertible securities)													
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)		vative rities lired r osed ) r. 3, 4	6. Date Exercisable Expiration Date (Month/Day/Year)		7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying ative ity (Instr.	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)
										Amount or Number				

Date

Exercisable

Explanation of Responses:

1. Grant of stock-settled restricted stock unit, subject to three-year cliff vesting.

2. Includes (i) 504 shares acquired under Aveanna's Employee Stock Purchase Plan (the "ESPP") on January 4, 2022, (ii) 3,004 shares acquired under the ESPP on July 8, 2022, and (iii) 1,168 shares acquired under the ESPP on January 5, 2023.

### Remarks:

#### /s/ Shannon Drake, Attorney-02/16/2023

in-Fact

Title

Shares

Expiration Date

\*\* 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).

Code V

(A) (D)

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.