FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB APPROVAL | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average burden | | | | | | | | | |

0.5

hours per response:

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 Person* Ross Susan Williamson | | | | | | 2. Issuer Name and Ticker or Trading Symbol NVR INC [NVR] | | | | | | | | | | olicable) | g Person(s) to Is | |
|---|---|--|---|----------|--|--|---|-------------------------------------|---|--------|--|---|--|------------------------|--|---|---|--|
| (Last) (First) (Middle) 11700 PLAZA AMERICA DRIVE | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/15/2018 | | | | | | | | | Offic belov | er (give title w) | Other below | (specify) |
| SUITE 500 (Street) | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Indiv Line) X | · · | | | | |
| (City) | | | 20190 Zip) | | | | | | | | | | | | Forn Pers | | e than One Rep | orting |
| | | Tabl | e I - No | n-Deriv | ative | Sec | uritie | s Ac | quired | l, Dis | sposed o | f, or E | Benefic | ially | Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | | Execution Date, | | Transaction Disposed O Code (Instr. | | | es Acquired (A) o Of (D) (Instr. 3, 4 a | | and 5) Secur Benef Owne | | cially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | |
| | | | | | | | | | Code | v | Amount | (A) o | r Price | | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) |
| NVR, Inc. common stock 05/15/20 | | | | | 018 | | P | | 70 | A | \$2,9 | 95.2 | | 100 | D | | | |
| | | Та | ble II - | | | | | | | | osed of, convertib | | | | vned | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deel Execution if any (Month/I | on Date, | 4. Transa Code (I 8) | | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exerci Expiration Da (Month/Day/Y | | te | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | Deriv Secu (Inst | vative irity r. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | v | (A) | (D) | Date Exercis | able | Expiration Date | Title | Amount or Number of Shares | 1 | | | | |

Explanation of Responses:

Remarks:

<u>Eugene J. Bredow, Attorney-in-fact for Susan Williamson</u>

5

05/16/2018

Ross

** 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.