FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
----------------	----------

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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).

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>Afshar David</u>					2. Issuer Name and Ticker or Trading Symbol Aveanna Healthcare Holdings, Inc. [AVAH									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
]]] x										Officer (give title below)		Other (s	
(Last) (First) (Middle) C/O AVEANNA HEALTHCARE HOLDINGS INC.						3. Date of Earliest Transaction (Month/Day/Year) 12/01/2021									C	Chief Fina	ncial	Officer	
400 INTERSTATE NORTH PARKWAY SE						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) ATLANTA GA 30339														X Form filed by One Reporting Person Form filed by More than One Reporting					
(City)	(Sta	ate) (Z	Zip)			Person													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day						Execution Da			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			4 and Secu Bene Own		rities eficially ed Following		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount	(A) o	Pric	e	Report Transa (Instr. 3	nsaction(s) etr. 3 and 4)			(111511.4)
Common Stock, par value \$0.01 per share 12/01/20					2021			P		4,760	A	\$6.	2625	625 28,214			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
1. Title of Derivative Security (Instr. 3)	perivative Conversion Date Executecurity or Exercise (Month/Day/Year) if any		emed tion Date, n/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Da (Month/Day/Y		ate	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amoun or Numbe of Shares	per					

Explanation of Responses:

Remarks:

/s/ Shannon Drake, Attorney-

12/01/2021

** 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.