| SEC Form 4 | |
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| FORM | 4 |

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

| OMB APF | PROVAL |
|------------|-----------|
| MB Number: | 3235-0287 |

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

| 1. Name and Address of Reporting Person* $\frac{Rodrian Jeff E}{E}$ | | | 2. Issuer Name and Ticker or Trading Symbol <u>AeroVironment Inc</u> [AVAV] | | tionship of Reporting Pe all applicable) Director | 10% Owner | | | |
|---|---------------------------------|------------------|--|------------------------|---|---|--|--|--|
| (Last) 241 18TH STRI | (First) (Middle) TREET SOUTH | | 3. Date of Earliest Transaction (Month/Day/Year) 04/04/2024 | X | Officer (give title below) Sr. VP | Other (specify below) | | | |
| SUITE #415 | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | vidual or Joint/Group Fili Form filed by One Re | | | | |
| (Street) ARLINGTON | VA | 22202 | | | Form filed by More the Person | , i i i i i i i i i i i i i i i i i i i | | | |
| (City) | (State) | (Zip) | Rule 10b5-1(c) Transaction Indication | | | | | | |
| | | able L - Non-Dor | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. | | | | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | if any | 3. Transa Code (8) | | Disposed Of | Disposed Of (D) (Instr. 3, 4 and 5) | | | | Ownership |
|---------------------------------|--|--------|------------------------------|---|-------------------|--|----------|--|---|------------|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Common Stock | 04/04/2024 | | F | | 51 ⁽¹⁾ | D | \$146.42 | 2,506 | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 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) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. Disposition made pursuant to a net settlement whereby shares of stock were tendered to satisfy tax withholding obligations arising in conjunction with the vesting of previously issued Restricted Stock Awards.

Colby Petersen, attorney-in-

fact

04/08/2024

** 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.