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UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ARV ASSISTED LIVING INC

Form 4 October 03, 2001

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FORM 4 [] Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).		ONITED SIE	WASHINGTON, DC 20549						
		Filed purs Exchang Public	suant t ge Act Utilit or	t to Section 16(a) of the Securities of 1934, Section 17(a) of the lity Holding Company Act of 1935 or Section 30(f) of the estment Company Act of 1940					OMB N EXPIF ESTIM HOURS
(Print or Type	Responses)								
1. Name and A	Address of Repo	rting Person*		 2. Issu	er Name and	d Ticker	or Tradin	ng Symbol	 6. F
_	ry Abdo			ARV ASSISTED LIVING, INC. (SRS)					
(Last) 245 Fischer Av	(Last) (First) 15 Fischer Avenue, Suite D-1		e) 3	Number of Reporting Person, if an entity			Month/Year September, 2001		01
Costa Mesa	(Street)	92626	-	Vol.	luntary)		5. If Amendment, Date of Original		
	(State)						10M) 	nth/Year)	
	TAB	LE 1 NON-DE							
1. Title of Security (Instr. 3)		2. Trans- 3. 3 action a Date ((Instr. 8) Own					unt of
			•		•				ed at
		(Month/ Day/	•		Amount	(A) or (D)	Price	End	ed at of Mon
 Common Stock		(Month/ Day/			, 	(A) or		End (In	of Mo

Reminder: Report on a separate line for each class of securities beneficially owned directly or i

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*If the Form is filed by more than one Reporting Person, see Instruction 4(b)(v).

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FORM 4 (CONTINUED)	TABLE II DE (E.G.,				IRED, DISP OPTIONS, C				
1. Title of Derivative Security (Instr. 3)	2. Conver- 3. sion or Exercise Price of Derivative Security	action Date (Month/ Day/			5. Number of Derivative Securities Acquired (A) or Disposed (D) (Instr. 4, and 5)		cisak Expir Date (Mont Year	cisable an Expiration Date	
								tion	
Employee Stock Option (Right to Buy)									
1. Title of Derivative Security (Instr. 3)	9. Number of Derivative Securities Beneficially Owned at End of Month (Instr. 4)		F o	wnership orm of erivativ ecurity: irect (I r Indire	7e : D) ect (I)	11.	Nature of Indirect Benefici Ownershi (Instr.	al p	
Employee Stock Option (Right to Buy)	382,500			D					
Explanation of Responses									

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

**Intentional misstatements or omissions of facts constitute Federal Criminal

/s/ ABDO H. KHC

**Signature of

Abdo H

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Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid ${\tt OMB}$ number.