FORM	4
------	---

Check this box if no
longer subject to
Section 16. Form 4 or
Form 5 obligations
may continue. See
Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 Report AX PETER L	2. Issuer Name ar Meritage Home				bol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X_Director 10% Owner				
(Last) (First) 8800 EAST RAINTREE	(Middle) DRIVE, SUITE 300	3. Date of Earliest Transaction (Month/Day/Year) 02/16/2022						Officer (give title below)	Other (specify b	below)
(Street) SCOTTSDALE, AZ 8526	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person			
(City) (State)	(Zip)	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)	Code (Instr. 8)		ion 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Direct (D)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)
MTH Common Shares	02/16/2022		А		2,500 (<u>1)</u>	А	\$ 0	8,250 (2)	D	
MTH Common Stock								20,091 (3) (4)	Ι	HELD IN TRUST

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

SEC 1474 (9-02)

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 control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(<i>e.g.</i> , puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.		6.	Date Exer	cisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transactio	n Ni	Number and Expiration Date A		Amo	unt of	Derivative	Derivative	Ownership	of Indirect		
Security	or Exercise	(Month/Day/Year)	any	Code	of	of (Month/Day/Year) U		Unde	rlying	Security	Securities	Form of	Beneficial		
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	D	Derivative		Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership		
	Derivative				Se	Securities ((Instr. 3 and			Owned	Security:	(Instr. 4)		
	Security				A	cquire	d			4)			Following	Direct (D)	
						() or							T T	or Indirect	
						ispose	d						Transaction(s)		
						of (D)					(Instr. 4)	(Instr. 4)			
					· ·	(Instr. 3,									
					4,	and 5)								
											Amount				
							D	ate	Expiration		or				
								xercisable	*	Title	Number				
								Acterisable	Date		of				
				Code V	/ (/	A) (I	D)				Shares				

Reporting Owners

	Relationships						
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			
AX PETER L 8800 EAST RAINTREE DRIVE SUITE 300 SCOTTSDALE, AZ 85260	Х						

Signatures

/s/ Alison Sasser, attorney-in-fact for Peter L. As	ζ.	02/18/2022
---	----	------------

Date

Explanation of Responses:

- * 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).
- (1) Represents grant of restricted share units. The shares will fully vest on the third anniversary of the date of grant.
- (2) Balance represents restricted stock units not vested.
- (3) Balance reflects all other holdings, including restricted stock units that have previously vested.
- (4) All shares are held in a living trust controlled by Mr. Ax.

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

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 OMB number.