FORM 4

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

OMB APPROVAL						
OMB Number:	3235-0	287				
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nours per response	e	0.5				

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 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

(Print or Ty	pe Response	s)																
1. Name and Address of Reporting Person *- AX PETER L				2. Issuer Name and Ticker or Trading Symbol Meritage Homes CORP [MTH]							5	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
	(Last) (First) (Middle) 8800 EAST RAINTREE DRIVE, SUITE 300					3. Date of Earliest Transaction (Month/Day/Year) 03/04/2022							-	Office	r (give title belo	ow)	Other (specify	below)
(Street) SCOTTSDALE, AZ 85260				4. If Amendment, Date Original Filed(Month/Day/Year)								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City		(State)		(Zip)			able	I - No	n-De	rivative	Securit	ies A	cquir	red, Dispo	osed of, or l	Beneficially	Owned	
1.Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year		Exect any	Deemed ution Date, i	f Coo	(Instr. 8) (Instr. 3, 4 and 5) Reported Trans		lly Owned l Transaction	Following	Ownership or Form:	Beneficial					
					(Mon	th/Day/Yea		Code	V	Amoun	(A) or (D)	Pr	rice	(Instr. 3 a	(I)		or Indirect	Ownership (Instr. 4)
МТН Со	ommon Sto	ck	03/04	4/2022				S		5,062	D	\$ 98. (1)	.86	15,029 (2) (3)		I	HELD IN TRUST	
МТН Со	MTH Common Shares											8,250 (4)			D			
Reminder:	Report on a s	separate line f	or each		Deriv	ative Secur	ities A	cquir	Person the	sons whatained if form disposed	no responding this splays	form a cu Benef	n are urren ficiall	not requ tly valid		formation spond unle trol numbe	ess	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	(Month/Day/Year) any (Month/Day/Year) Code (Instr. 8) Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Exercisable 7. Tration Date Day/Year) 7. The Day/Year 1. Tration Date 1. Tration Date 1. Tration Date 2. Trati		7. Tit Amo Unde Secui (Instr 4)	tle and unt of orlying rities : 3 and Amount or Number		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Owners Form o Derivat Securit Direct (or India	Beneficia Ownershi (Instr. 4)							
						Code V	(A)	(D)		rcisable	Date			of 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	X						

Signatures

/s/ Alison Sasser, attorney-in-fact for Peter L. Ax	03/08/2022
**Signature of Reporting Person	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).
- The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$98.48 to \$99.23, inclusive. The reporting (1) person undertakes to provide to the Registrant, any security holder of the Registrant, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote.
- (2) Balance reflects all other holdings, including restricted stock units that have previously vested.
- (3) All shares are held in a living trust controlled by Mr. Ax.
- (4) Balance represents restricted stock units not vested.

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.