FORM 4

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

OMB APPROVAL

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

5. Relationship of Reporting Person(s) to Issuer

longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person*

(Print or Type Responses)

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

2. Issuer Name and Ticker or Trading Symbol

Hood Da	Fathom Holdings Inc. [FTHM]							_,	C Director	(Cneci	an appnea 101	% Owner						
(Last) (First) (Middle) C/O FATHOM HOLDINGS INC., 2000 REGENCY PARKWAY SUITE 300				3. Date of Earliest Transaction (Month/Day/Year) Officer (give title below) Other (specify below)														
(Street) CARY, NC 27518				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				Execution Date, if		(Instr. 8)		(A)	4. Securities Acqui (A) or Disposed of (Instr. 3, 4 and 5)						Ownership Form: Direct (D)	of In Bene Own	7. Nature of Indirect Beneficial Ownership	
						Coo	de V	Am	C	A) or O)	Price				or Indirect (I) (Instr. 4)	(Inst	r. 4)	
Commor	n Stock		06/15/2021				M	[8,4	486 A		\$ 4.71 8	,486			D		
Commor	ı Stock		06/15/2021				S		4,0	043 D		\$ 33.72 4.	,443			D		
1. Title of Derivative Security (Instr. 3)	Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transac Code	etion	5. No of Deriv Secu Acqu (A) o Disp of (D	vative urities uired or cosed o) r. 3, 4,	con form quired, D s, options 6. Date 2 Expirati	red, Disposed of, or Beneficially ptions, convertible securities) Date Exercisable and xpiration Date Month/Day/Year) 7. Title of Und Securities			rm are not rently vali- reficially O rities)	c and Amount lerlying Derivative Security Securities 8. Price of Derivative Derivative Securities		of 10. Owner Form c Deriva Securit Direct or Indi	ship of Herical Street (D) rect	1. Natur of Indire Beneficia Ownersh Instr. 4)	
				Code	V	(A)	(D)	Date Exercisa		Expiratio Date	n	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$ 4.71	06/15/2021		М			8,486	(2)		05/15/2	029	Commo	n 8,486	\$ 0	0	D		
Stock Option (Right to Buy)	\$ 44							(3)		02/28/2	031	Commo Stock	n 2,273		2,273	D		
Stock Option (Right to Buy)	\$ 20.10							<u>(4)</u>		11/03/2	030	Commo Stock	n 2,986		2,986	D		

Reporting Owners

		Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other			

Hood David C. C/O FATHOM HOLDINGS INC. 2000 REGENCY PARKWAY SUITE 300 CARY, NC 27518	X					
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Signatures

/s/ Donald R. Reynolds, by Power of Attorney	06/16/2021
**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).
- (1) The reported securities were sold in multiple transactions at prices ranging from \$33.53 to \$33.94. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within such range.
- (2) The option vested in full on May 15, 2020.
- (3) The option will vest in full on March 1, 2022, provided that the reporting person provides Continuous Service to the Issuer or a Related Entity as of such vesting date.
- (4) The option will vest in full on November 4, 2021, provided that the reporting person provides Continuous Service to the Issuer or a Related Entity as of such vesting date.

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.