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

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

<u> </u>	pe Response	<i>'</i>																	
1. Name and Address of Reporting Person *- Bennett Christopher D.				2. Issuer Name and Ticker or Trading Symbol Fathom Holdings Inc. [FTHM]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)X_ Director 10% Owner							
(Last) (First) (Middle) C/O FATHOM HOLDINGS INC., 2000 REGENCY PARKWAY DRIVE, SUITE 300				3. Date of Earliest Transaction (Month/Day/Year) 08/12/2022										e title below)		her (specify b	elow)		
(Street)				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							
CARY, NC 27518													Form filed by More than One Reporting Person						
(Cit	y)	(State)	(Zip)			Ta	able I	- Non-	Deriv	ative S	ecurities	s Acqu	ired, I	Disposed	of, or Bene	ficially Own	ned		
1.Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea		2A. Deemed Execution Date, if any (Month/Day/Year)		ate, if	(Instr. 8)		(A) or Dispo (Instr. 3, 4 at		isposed o	of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		6. Ownership Form: Direct (D) or Indirect (I)	p of I Ber Ow	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
							Coc	ie '	V A	mount	(D)	Price					(Instr. 4)		
Commor	n Stock											1,1		,100			D		
Reminder:	Report on a s	separate line for each						Per in t dis	sons his fo plays	orm ar s a cur	e not re rently v	equire valid O	d to re MB c	espond ontrol n	unless the	tion contai e form	ned SE	C 147	4 (9-02)
			Table II	Derivat									Owne	ed					
1. Title of Derivative Security (Instr. 3)				4. 5. Num Transaction of Der Code Securi			mber divative Expiration Date (Month/Day/Year) 6. Date Exercisable and of Unit of Uni				7. Title of Und Securi	derlyin ties	erlying Derivative		9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s)	Owne Form Deriv Secur Direct or Ind (I)	of ative ity: t (D) lirect	(Instr. 4)	
																	(Inetr	4)	
				Code	V	(A)	(D)	Date Exerci	sable	Expira Date	ıtion	Title		Amount or Number of Shares		(Instr. 4)	(Ilisti)		
Stock Option (Right to Buy)	\$ 8.22	08/12/2022		Code		(A) 13,078				Date	1/2032	Title Comi	mon	or Number of	\$ 0)	
Option (Right	\$ 8.22 \$ 44	08/12/2022						Exerci	D	08/11	1/2032	Comi	mon ck mon	or Number of Shares	\$ 0	(Instr. 4)			
Option (Right to Buy) Stock Option (Right		08/12/2022						Exerci	2)	08/11 02/28	1/2032	Comi Sto	mon ck mon ck	or Number of Shares 13,078	\$ 0	(Instr. 4)	Е)	

Reporting Owners

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

nnett Christopher D. D FATHOM HOLDINGS INC. DO REGENCY PARKWAY DRIVE, SUITE 30 RY, NC 27518	X					
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Signatures

/s/ Donald R. Reynolds, by Power of Attorney	08/16/2022
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).
- (1) The option will vest in full on August 12, 2023, provided that the reporting person provides Continuous Service to the Issuer or a Related Entity as of such vesting date.
- (2) The option vested in full on March 1, 2022.
- (3) The option vested in full on November 4, 2021.
- (4) The option vested in full on April 16, 2020.

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.