FORM 4

to Section 16. Form 4 or Form obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. 20549 |
|-------------|------------|
|-------------|------------|

| Check this box if no longer subject | STATEMENT OF CHANGES IN BENEFICIAL | OWNERSHIP |
|-------------------------------------|------------------------------------|------------------|
| to Section 16. Form 4 or Form 5 | | |
| obligations may continue. See | | |

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* MERRILL ALLAN P | | | | | 2. Issuer Name and Ticker or Trading Symbol BEAZER HOMES USA INC [BZH] | | | | | | | | | (Chec | k all app | tionship of Reportin all applicable) Director Officer (give title | | rson(s) to Is 10% O Other (| /ner |
|---|--|---------|--|------------|--|--|-----------------------|--------|--|------------|------------|---|---|-------------------------------|---|--|---|-----------------------------------|------------|
| (Last) (First) (Middle) 1000 ABERNATHY RD SUITE 260 | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/15/2021 | | | | | | | | | X | belov | | | | |
| (Street) ATLANTA GA 30328 | | | | | 4. If <i>i</i> | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | lividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (Z | Zip) | | | | | | | | | | | | F 6130 | | | | |
| | | Table | I - No | on-Deriva | tive S | Secu | rities | Acc | uired | l, Dis | posed of, | or E | Benef | iciall | y Own | ed | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transaction Date (Month/Day/Year) | | 2A. Deemed Execution Date, ar) if any (Month/Day/Year) | | | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | 4 and Securit Benefic Owned | | ties cially I Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pr | rice | Report Transa (Instr. | ed ction(s) 3 and 4) | | | (Instr. 4) |
| Common Stock | | | | 11/15/2021 | | | | A | | 287,804(1) | A | 1 | \$ <mark>0</mark> | 1,158,987 | | D | | | |
| Common Stock | | | 11/15/2021 | | | | F | | 129,800(2) | I | \$ | \$21.49 1,0 | |)29,187 | | D | | | |
| Common Stock | | | 11/15/2021 | | | | F | | 9,384(3) | I | \$ | 21.49 | 1,019,803 | | D | | | | |
| Common Stock | | | 11/15/2021 | | | | F | | 14,544 ⁽³⁾ | I | \$ | 21.49 | 1,005,259 | | D | | | | |
| Common Stock | | | 11/16/2021 | | | | | F | | 8,717(3) | I | \$ | 22.18 | 99 | 996,542 | | D | | |
| | | Tal | ble II | | | | | | | | osed of, c | | | | Owne | d | | | |
| 1. Title of Derivative Security (Instr. 3) | ve Conversion Date Execution Date, or Exercise (Month/Day/Year) if any | | 4. Transa Code (8) | (Instr. | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Expira (Month | tion D | | | De Se (In | Price of erivative curity estr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transactio (Instr. 4) | y | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

- 1. Shares earned upon vesting of Fiscal 2019-2021 performance share award.
- 2. Shares withheld upon vesting of performance share award to pay tax withholding obligations.
- 3. Shares withheld upon vesting of restricted stock to pay tax withholding obligations.

Remarks:

/s/ Kristi O. Crawford, as

11/17/2021

attorney-in-fact

** Signature of Reporting Person Date

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

- * 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).

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

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 Number.