FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL								
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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

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 Reporting Person*  Zalupski Patrick O.					Dre	2. Issuer Name and Ticker or Trading Symbol     Dream Finders Homes, Inc. [ DFH ]      3. Date of Earliest Transaction (Month/Day/Year)								(Chec	Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner     Officer (give title Other (specify					
(Last) (First) (Middle) 14701 PHILLIPS HIGHWAY, SUITE 300					03/08/2023									X	Officer (give title Ot below) be President and CEO				specify	
(Street) JACKSONVILLE FL 32256 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
Date				Date	2. Transaction Date Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securition Disposed				5. Amount Securities Beneficially Following	y Owned Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)		Price	Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A common stock, par value \$0.01 per share 03/0				8/2023		A		368,603(1)		Α	\$0	945,311(5)		D						
Class B common stock, par value \$0.01 per sharε <sup>(2)</sup>														58,820	),586		D			
Class B common stock, par value \$0.01 per shar€ <sup>(2)</sup>														809,	409		I	By trust <sup>(3)</sup>		
Class B common stock, par value \$0.01 per share <sup>(2)</sup>															596,158			I	See footnote <sup>(4)</sup>	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
Derivative Conversion Date Execution Security (Instr. 3) Or Exercise (Month/Day/Year) if any			3A. Deemed Execution D if any (Month/Day/	Date, Transaction Code (Inst					6. Date Exercisa Expiration Date (Month/Day/Yea		e Securities Under		derlying curity	ying Derivative		s Ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A) (D)		Date Expira Exercisable Date		Expiration Date	or Nu		Amount or Number of Shares	(Instr. 4)		on(a)			

## Explanation of Responses:

- 1. Restricted stock will vest in three equal annual installments beginning on March 8, 2024 and each anniversary thereof.
- 2. Each share of Class B Common Stock is convertible at the option of the reporting person into one share of Class A Common Stock of Dream Finders Homes, Inc. and has no expiration date.
- 3. Shares contributed to trust established for the benefit of the reporting person's children.
- 4. Shares held by POZ Holdings, Inc., which is controlled by the reporting person.
- 5. Includes 8,990 shares held in a 401(k) account.

/s/ Robert E. Riva by Power of Attorney

03/10/2023

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.