FORM 4

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

OMB APPROVAL
OMB Number: 3235-0287
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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 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

1. Name ar				1										
1. Name and Address of Reporting Person* TAYLOR NANCY M			2. Issuer Name and Ticker or Trading Symbol TopBuild Corp [BLD]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director 10% Owner					
(Last) (First) (Middle) C/O TOPBUILD CORP., 475 NORTH WILLIAMSON BOULEVARD			3. Date of Earliest Transaction (Month/Day/Year) 05/11/2021					Office	r (give title belo	ow)	Other (specify b	elow)		
DAYTONA BEACH, FL 32114				4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City		(State)	(Zip)	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned						Owned				
1.Title of Security (Instr. 3)		1	2. Transaction Date (Month/Day/Year)	•	Code (Instr. 8)		4. Securities Acquire (A) or Disposed of (Instr. 3, 4 and 5)		of (D)	Beneficially Owned Follow Reported Transaction(s)		Collowing (s)	Form:	7. Nature of Indirect Beneficial
				(Month/Day/Year	Code	V	Amount	(A) or (D)				\ /	Ownership (Instr. 4)	
Common	Stock		05/11/2021		S	7	700	D	\$ 222	4,550			D	
								respo						1474 (9-02)
				Derivative Securit		contain the fo	ined in rm disp posed o	this for plays a f, or Ben	rm are curre eficial	not requesting ntly valid	uired to res	spond unle trol numbe	ss	1474 (9-02)
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Y	3A. Deemed Execution Da any	e.g., puts, calls, wa 4. Transaction Code Year) (Instr. 8)	arrants, o	the formation of the following	ined in rm disp posed o	this for plays a f, or Ben ble secu isable n Date	rm are current rities) 7. To Amo Und Secu	not requesting ntly valid	OMB conf	spond unle	of 10. Ownersl Form of Derivati Security Direct (I or Indire	11. Nature of Indire Beneficia Ownersh (Instr. 4)

	Relationships				
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
TAYLOR NANCY M C/O TOPBUILD CORP. 475 NORTH WILLIAMSON BOULEVARD DAYTONA BEACH, FL 32114	X				

Signatures

/s/ Joe Jacumin, Attorney-in-Fact	05/12/2021
**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).

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.