FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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Name and Address of Reporting Person* Earley Terry						2. Issuer Name and Ticker or Trading Symbol Veritex Holdings, Inc. [VBTX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner							
(Last) (First) (Middle) C/O VERITEX HOLDINGS, INC. 8214 WESTCHESTER DRIVE, SUITE 800						3. Date of Earliest Transaction (Month/Day/Year) 11/03/2021								X Officer (give title Other (specify below) Chief Financial Officer							
O214 WESTCHESTER DRIVE, SUITE 600						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street) DALLAS TX 75225															Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(S	tate)	(Zip)												. 0.00						
		Tab	le I - N	lon-Deri	vativ	e Sec	curit	ies A	cquire	d, D	isposed o	f, or Be	enefic	ially	/ Owned						
Date			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			1 5)	Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	ount (A) or (D) Price			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock			11/03/2021				M		10,000	Α	\$42.8	876	60,890		D						
Common Stock 11/0			11/03/2	.021				F		10,000	D	\$42.8	876	50,890		D					
Common Stock														6,800		I		By Terry S Early - Individual Retirement Account			
		7	Table I								posed of, , convertil				Owned		,	,	•		
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date,	4. Transa Code (8)	ction	5. Number of		6. Date Exer Expiration D (Month/Day/		cisable and	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		unt	8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitii Benefici Owned Followir Reporte Transac (Instr. 4)	ve es ially ng ed etion(s)	10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amou or Numb of Share	ber							
Employee Stock Option (right to buy)	\$21.9	11/03/2021			М			10,000	01/01	/2019	04/04/2027	Common Stock	10,0	000	\$0	45,3	300	D			

Explanation of Responses:

Remarks:

The transactions reported above in Table I reflect the cashless exercise of stock options. The cashless exercise for each set of options is reported in two lines. The first line of the cashless exercise transaction is coded M in column 3 of Table I and reports in column 4 the number of shares issuable upon exercise of the options had cash been paid to exercise the options, together with the exercise price with Code A for acquired. The line coded F in column 3 of Table I relates to the same cashless exercise on the preceding line and reports in Column 4 the number of shares deducted from the total number of shares issuable to pay for the cashless exercise of such options with Code D for disposed. The transactions reported in Table II above, reflect the disposition of the same stock options whose cashless exercise is disclosed in Table I

/s/ C. Malcolm Holland

11/05/2021

** 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.