FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

Check this box if no longer subject to

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Vashington.	D.C.	20549	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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OMB Number: 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

1. Name and Address of Reporting Person* McFarland F. K. III						2. Issuer Name and Ticker or Trading Symbol HomeTrust Bancshares, Inc. [HTBI]											ationship k all appl Direc	licable)		Person(s) to Issuer			
(Last) (First) (Middle) C/O HOMETRUST BANCSHARES, INC.						3. Date of Earliest Transaction (Month/Day/Year) 11/22/2019											Office below	er (give title v)		Other (below)			
10 WOO	DFIN STR	EET			4.	4. If Amendment, Date of Original Filed (Month/Day/Year)											Individual or Joint/Group Filing (Check Applicable Line)						
(Street) ASHEVI	LLE N	С	28801													X		filed by One filed by Mor on	•	Ü			
(City)	(S	tate)	(Zip)																				
		Tal	ole I - Noi	n-Deriv	vativ	e Se	ecuri	ties A	cqu	uired,	Dis	posed	of, o	r Bei	nefici	ially	Owne	d					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year		,	Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			ed (A) o tr. 3, 4 a	4 and 5) Secu Bene Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
										Code	v	Amoun	t	(A) or (D)	Pric	e		ed ction(s) 3 and 4)			(Instr. 4)		
Common Stock			11/2	2/201	19				М		5,67	676		\$1	4.37	2	29,976		D				
Common Stock			11/2	2/2019					S		5,67	76	D	\$2	26.2	2	4,300	300 D					
Common Stock																3	3,800		I	By Spouse			
		7	Table II - I (Deriva e.g., p													wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution I if any (Month/Day	Date,	4. Fransaction Code (Instr. 3)		of Deri Sec Acq (A) Disp of (I	posed D) tr. 3, 4	Exp	6. Date Exercisable Expiration Date (Month/Day/Year)			of Securi Underlyir		ying tive Security 3 and 4)		Price of erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Dat Exe	e ercisable		piration te	Title		Amoun or Numbe of Shares	r							
Stock Option	\$14.37	11/22/2019			M			5,676		(1)	02/	/11/2023	Comn		5,676		\$0	20,000		D			
Stock Option	\$26									(2)	02/	/11/2028	Comn		1,400			1,400		D			

Explanation of Responses:

\$27.51

- 1. Represents stock option granted under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 20% increments on February 11, 2014, 2015, 2016, 2017 and 2018.
- 2. Represents stock option granted under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 100% on February 11, 2019.
- 3. Represents stock option granted under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 100% on February 11, 2020.

Remarks:

Stock

Option

/s/ Tony J. VunCannon,

2,300

Attorney-in-Fact for F.K.

11/22/2019

D

McFarland, III

Commor Stock

02/11/2029

** 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.