FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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 Koontz Craig C.						2. Issuer Name and Ticker or Trading Symbol HomeTrust Bancshares, Inc. [HTBI]									Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 02/11/2019										_	(give title		Other (s	
C/O HOMETRUST BANCSHARES, INC. 10 WOODFIN STREET						4. If Amendment, Date of Original Filed (Month/Day/Year)								- 1	Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person				
(Street) ASHEVIL	(Street) ASHEVILLE NC 28801														Form f	iled by More	e than	one Repor	ting Person
(City) (State) (Zip)																			
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Trans Date (Month/l					· · · · ·		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,			Benefici Followin	es ally Owned g	Forn (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amoui	nt	(A) or (D)	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)
Common Stock 02/11					1/2019	/2019		A		700	700 ⁽¹⁾ A		\$0	31	1,829		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, T	4. Transactior Code (Instr. 8)		5. Num of Derivat Securit Acquire (A) or Dispos (D) (Ins 4 and 5	tive ties ed ed of str. 3,	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount o Securities Underlying Derivative Security (Instr. 3 and 4)		derlying curity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				c	ode	v	(A)	(D)	Date Exercisab		xpiration ate	Title		Amount or Number of Shares					
Stock Option	\$27.51	02/11/2019			A		2,300		(2)	0	2/11/2029	Comr		2,300	\$0	2,300		D	
Stock Option	\$14.37								(3)	0:	2/11/2023	Comr		32,000		32,000		D	
Stock Option	\$26								(4)	0	2/11/2028	Comr		1,400		1,400		D	

Explanation of Responses:

- 1. Represents restricted stock award under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 100% on February 11, 2020.
- 2. Represents stock option granted under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 100% on February 11, 2020.
- 3. 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.
- 4. Represents stock option granted under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 100% on February 11, 2019.

Remarks:

/s/ Tony J . VunCannon, Attorney-in-Fact for Craig C.

02/13/2019

Koontz

** 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.