FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL									
l	OMB Number:	3235-0287								
l	Estimated average burden									

0.5

hours per response:

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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1. Name and Address of Reporting Person* Houghton Keith J						2. Issuer Name and Ticker or Trading Symbol HomeTrust Bancshares, Inc. [HTBI]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner						
																give title		Other (
(Last) (First) (Middle)							Date of Earliest Transaction (Month/Day/Year)									below) b			. ,		
HOMETRUST BANCSHARES, INC.						02/11/2016									EVP, Chief Credit Officer						
10 WOODFIN STREET																					
							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)													Line) X Form filed by One Reporting Person								
ASHEVILLE NC 28801														Form filed by More than One Reporting				rting			
(Oit)		24-4-1	(7:-)												Persor	1					
(City)	(5	State)	(Zip)																		
		Tab	le I - Nor	า-Deriv	ativ	e Se	curitie	s Ac	quired,	Dis	oosed o	f, or	r Ben	eficiall	y Owned	I					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Transaction Code (Instr. 5		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Securitie Beneficia Owned F	5. Amount of Securities Beneficially Owned Following		vnership n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price	Reported Transact (Instr. 3	tion(s)			(Instr. 4)		
Common Stock 02/11							/2016		A		4,000	(1) A		\$0	4,000			D			
		-	Table II -								sed of, onvertil				Owned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Yea	Date, T	1. Transa Code (3)		of		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Ame of Securities Underlying Derivative Secu (Instr. 3 and 4)		s security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		xpiration ate	Title		Amount or Number of Shares							
Stock Option	\$17.35	02/11/2016			A		10,000		(2)	C	2/11/2026		nmon ock	10,000	\$0	10,00	0	D			

(3)

Explanation of Responses:

\$15.88

1. Represents restricted stock award under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 20% increments on February 11, 2017, 2018, 2019, 2020 and 2021.

- 2. Represents stock option granted under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 20% increments on February 11, 2017, 2018, 2019, 2020 and 2021.
- 3. Represents stock option granted under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 20% increments on March 10, 2015, 2016, 2017, 2018 and 2019.

Remarks:

Stock Option

/s/ Teresa White, Attorney-in-Fact for Keith J. Houghton

10,000

Common Stock

03/10/2024

02/16/2016

10,000

D

** 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.