FORM 4

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:	0.5									

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 or Section 30(h) of the Investment Company Act of 1940

												· ·								
Name and Address of Reporting Person* Williams Richard Tyrone					2. Issuer Name and Ticker or Trading Symbol HomeTrust Bancshares, Inc. [HTBI]								(Ch	elationship eck all appli X Directo	cable) or	g Pers	10% O	vner		
(Last) HOMET	`	irst) NCSHARES, IN	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 02/11/2022										Officer (give title Other (speci below) below)					
10 WOODFIN STREET					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)	ILLE N	C	28801									X Form filed by One Reporting Person Form filed by More than One Reporting Person					I			
(City)	(S	tate)	(Zip)																	
		Tab	le I - Nor	า-Deriva	ative	Se	curitie	es A	cqui	ired, I	Disp	osed (of, or I	3ene	ficial	ly Owne	t			
Date			2. Transa Date (Month/D		ar)	2A. Deemed Execution Date, if any (Month/Day/Yea		е,	3. 4. Securi Transaction Disposed Code (Instr. 5)		ities Acc d Of (D)	uired ((Instr. 3	A) or 3, 4 and	Benefici Owned I	es ally Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
										Code	v	Amount	mount (A) or (D)		Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common Stock 02/1:				02/11	/2022				A		955((1) A		\$ <mark>0</mark>	18	18,474		D		
		Т	able II -	Derivat (e.g., p												Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,	4. Transactio Code (Inst B)		of Deriv Secu Acqu (A) of Dispo	r osed) r. 3, 4	6. Date Exercisal Expiration Date (Month/Day/Year)			of Secu r) Underly Derivati		tle and Amoun ecurities erlying vative Security r. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exe	e rcisable		piration ate	Title	or Nu of	nount mber ares					
Stock Option	\$27.51									(2)	02	/11/2029	Commo		000		1,000		D	
Stock Option	\$26									(3)	02	/11/2028	Commo Stock	ⁿ 1,	000		1,000		D	
Stock Option	\$24.95									(4)	02	/11/2027	Commo	n 10	,000		10,000)	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, 2023.
- 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: 100% on February 11, 2019.
- 4. Represents stock option granted under Issuer's 2013 Omnibus Incentive Plan with the following vesting schedule: 20% increments on February 11, 2018, 2019, 2020, 2021 and 2022.

/s/ Tony J. VunCannon,

Attorney-in-Fact for Richard 02/15/2022

Tyrone Williams

** Signature of Reporting Person

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.