FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPROVAL								
l	OMB Number:	3235-0287							
l	Estimated average burd	en							
l	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* Biesecker Sidney A.						HomeTrust Bancshares, Inc. [HTBI]										elationship eck all appli X Directi	cable)	ng Pers	son(s) to Iss 10% Ov		
(Last) (First) (Middle) C/O HOMETRUST BANCSHARES, INC.						3. Date of Earliest Transaction (Month/Day/Year) 02/11/2019										Office below	(give title		Other (s below)	specify	
10 WOODFIN STREET						If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable					
(Street) ASHEVILLE NC 28801					_											X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																		
		Tab	le I - No	n-Deri	vative	e Se	curitie	s Ad	cquire	d, Di	ispo	osed o	of, or	Ben	eficial	y Owne	t t				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D.						ar)	2A. Deemed Execution Date, if any (Month/Day/Year		Code (Insti		on I			d (A) or r. 3, 4 and		es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
											1	Amount	(A (I	A) or D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock 02/11					1/2019	2019			F			191	D \$		\$27.5	29,282			D		
Common Stock 02/11/					1/2019	2019			A			700(1)		A	\$0	29	29,982		D		
Common	Stock															2,	019 I By KSOP				
		1	able II -				urities s, warı									Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, Transaction of				tive ities red sed	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)						s Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Exp Dat	oiration te	Title		Amount or Number of Shares						
Stock Option	\$27.51	02/11/2019			A		2,300		(2)		02/	11/2029	Comn		2,300	\$0	2,300		D		
Stock Option	\$14.37								(3)		02/	11/2023	Comn		32,000		32,000	0	D		
Stock Option	\$26								(4)		02/	11/2028	Comn		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 VunCannon, Attorney-02/13/2019 in-Fact for Sidney A. Biesecker

** 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.