TRI Pointe H	Iomes, Inc.									
Form 4 February 10,	2015									
	_								OMB AF	PROVAL
FORM	UNITE	O STATES		RITIES A shington			NGE C	COMMISSION	OMB Number:	3235-0287
Check this box if no longer subject to Section 16. SECURITIES Expires Expires Expires						Expires: Estimated a burden hour response n				
(Print or Type F	Responses)									
1. Name and A Holder Floy	ddress of Reportin d Will	ng Person <u>*</u>	Symbol	Name and nte Hom			-	5. Relationship of Issuer		
	(First) DINTE HOMES DIAMBOREE D		3. Date of (Month/D 02/08/20	-	ransaction			Director X Officer (give below)		Owner er (specify
	(Street)			ndment, D nth/Day/Yea	-	ıl		6. Individual or Jo Applicable Line) _X_ Form filed by 0		
IRVINE, CA	A 92612							Form filed by M Person		
(City)	(State)	(Zip)	Tabl	e I - Non-l	Derivative	Secur	ities Acq	uired, Disposed of	f, or Beneficial	ly Owned
1.Title of Security (Instr. 3)	2. Transaction Day(Month/Day/Yea	r) Execution any		3.	4. Securi on(A) or D (Instr. 3,	ities Ad ispose 4 and (A) or	cquired d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of
Common Stock	02/08/2015			F	773	D	\$ 15.07	29,291	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 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 Date, if any (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	fumber Expiration Date f (Month/Day/Year) berivative ecurities acquired A) or bisposed f (D) instr. 3,		Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Holder Floyd Will C/O TRI POINTE HOMES, INC. 19540 JAMBOREE ROAD, SUITE 300 IRVINE, CA 92612			President of Trendmaker Homes				
Signatures							

/s/Michael D. Grubbs,	
attorney-in-fact	02/10/2015
<u>**Signature of Reporting Person</u>	Date

**Signature of Reporting Person

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.