

TRI POINTE HOMES, INC.

Reported by GRUBBS MICHAEL D

FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 04/03/15 for the Period Ending 04/01/15

Address 19520 JAMBOREE ROAD, SUITE 200

IRVINE, CA 92612

Telephone (949) 478-8600

CIK 0001561680

Symbol TPH

Fiscal Year 12/31





[] 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

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP **OF SECURITIES**

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 Add	dress of R	eporti	ng Person	*	2. Is	suer Nam	ne and	ΙT	icker o	or Tr	adin	ıg Syı	mbol	5. Relation (Check all			Person(s)	to Issuer
GRUBBS MI	CHAEI	D			TR	I Point	e Ho	me	es, In	c. [TP	H]						
(Last)	(First)	(First) (Middle)				3. Date of Earliest Transaction (MM/DD/YYYY)							Director 10% Owner 20th or (area					
C/O TRI POINTE HOMES,				4/1/2015								XOfficer (give title below)Other (speci			r (specify			
INC., 19540 J SUITE 300			,	,			_	T / J	L/ 2 U1.	5				CFO and	Treasur	er		
											d	6. Individual or Joint/Group Filing (Check Applicable Line)						
IRVINE, CA	92612													X Form f	iled by One	Reporting Pe	rson	
(City)	(State)		(Zip)		_ X _ Form filed by One Reporting Per Form filed by More than One Repo							n						
		Tab	ole I - Nor	ı-Der	ivat	ive Secur	rities A	A c	quired	l, Di	spos	sed of	f, or I	Beneficially	y Owned			
1.Title of Security (Instr. 3)			2		rans.	2A. Deemed Execution Date, if	3. Trans. Code (Instr. 8)		4. Securities A (A) or Dispos (Instr. 3, 4 and		sed of (D) Follow		ount of Securities Beneficially Owned wing Reported Transaction(s) 3 and 4)		Ownership Form:	7. Nature of Indirect Beneficial Ownership		
				any	Code V		Amount (A		Price				or Indirect (I) (Instr. 4)	(Instr. 4)				
Common Stock														12	27749		D	
Common Stock 4/1.				2015		S (1)		45000	D	\$15.	21 (2)	860865			I	The Grubbs Family Trust		
Tal	ble II - De	erivat	ive Securi	ties E	Bene	ficially C)wned	1(e.g. , p	outs,	call	ls, wa	ırran	ts, options	, convert	ible secur	rities)	,
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		te Execution Co	1. Γrans. Code Instr. 8	Der Sec Ac Dis	Number of rivative curities quired (A) or sposed of (D) str. 3, 4 and	and E	and Expiration Date				7. Title and Amou Securities Underly Derivative Securit (Instr. 3 and 4)		ying	(Instr. 5)	of derivative Securities Beneficially Owned Following Reported	Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr.	11. Nature of Indirect Beneficial Ownership (Instr. 4)
	Cc			Code	V (A	A) (D)	Date Exerc	cisa	Expi ble Date	iratior	Title	e Amo		Number of		Transaction (s) (Instr. 4)	4)	

Explanation of Responses:

- (1) The sale of the shares reported in this Form 4 was effected pursuant to a Rule 10b5-1 plan entered into by the reporting person effective March 6, 2015.
- (2) The sales price is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$15.08 to \$15.43, inclusive. The reporting person undertakes to provide TRI Pointe Homes, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.

Reporting Owners

Paparting Owner Name / Address	Relationships						
Reporting Owner Name / Address Director 10		10% Owner	Officer	Other			
GRUBBS MICHAEL D C/O TRI POINTE HOMES, INC. 19540 JAMBOREE ROAD, SUITE 300			CFO and Treasurer				
IRVINE, CA 92612							

Signatures

/s/Michael D. Grubbs	4/3/2015			
** 0:	Date			

** 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 control number.