

# TRI POINTE HOMES, INC.

Reported by  
**KEELER GLENN**

## FORM 4

(Statement of Changes in Beneficial Ownership)

Filed 03/02/15 for the Period Ending 03/01/15

Address	19520 JAMBOREE ROAD, SUITE 200 IRVINE, CA 92612
Telephone	(949) 478-8600
CIK	0001561680
Symbol	TPH
SIC Code	1531 - Operative Builders
Industry	Construction Services
Sector	Capital Goods
Fiscal Year	12/31

# FORM 4

**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

<b>1. Name and Address of Reporting Person *</b>  <b>Keeler Glenn</b> <small>(Last) (First) (Middle)</small>  <b>C/O TRI POINTE HOMES, INC., 19540 JAMBOREE ROAD, SUITE 300</b>  <small>(Street)</small>  <b>IRVINE, CA 92612</b>  <small>(City) (State) (Zip)</small>	<b>2. Issuer Name and Ticker or Trading Symbol</b>  <b>TRI Pointe Homes, Inc. [ TPH ]</b>  <b>3. Date of Earliest Transaction (MM/DD/YYYY)</b>  <p align="center"><b>3/1/2015</b></p>	<b>5. Relationship of Reporting Person(s) to Issuer (Check all applicable)</b>  <input type="checkbox"/> Director <span style="float:right"><input type="checkbox"/> 10% Owner</span> <input checked="" type="checkbox"/> <b>X</b> Officer (give title below) <span style="float:right"><input type="checkbox"/> Other (specify below)</span> <b>Principal Accounting Officer</b>  <b>6. Individual or Joint/Group Filing (Check Applicable Line)</b>  <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person															
<b>Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned</b>																	
<b>1. Title of Security (Instr. 3)</b>	<b>2. Trans. Date</b>	<b>2A. Deemed Execution Date, if any</b>	<b>3. Trans. Code (Instr. 8)</b>	<b>4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)</b>	<b>5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)</b>	<b>6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)</b>	<b>7. Nature of Indirect Beneficial Ownership (Instr. 4)</b>										
Common Stock	3/1/2015		F	<table border="1" style="font-size: small;"> <tr> <th>Code</th> <th>V</th> <th>Amount</th> <th>(A) or (D)</th> <th>Price</th> </tr> <tr> <td></td> <td></td> <td align="right">357</td> <td align="center">D</td> <td align="right">\$15.88</td> </tr> </table>	Code	V	Amount	(A) or (D)	Price			357	D	\$15.88	9567	D	
Code	V	Amount	(A) or (D)	Price													
		357	D	\$15.88													

<b>Table II - Derivative Securities Beneficially Owned ( e.g. , puts, calls, warrants, options, convertible securities)</b>														
1. Title of Derivate Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Trans. Date	3A. Deemed Execution Date, if any	4. Trans. Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (s) (Instr. 4)	10. Ownership Form of Derivative Security: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

**Explanation of Responses:**

**Reporting Owners**

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
<b>Keeler Glenn</b> <b>C/O TRI POINTE HOMES, INC.</b> <b>19540 JAMBOREE ROAD, SUITE 300</b>  <b>IRVINE, CA 92612</b>			<b>Principal Accounting Officer</b>	

**Signatures**

/s/Glenn Keeler 3/2/2015

\*\* 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.

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