The Securities and Exchange Commission has not necessarily reviewed the information in this filing and has not determined if it is accurate and complete.

The reader should not assume that the information is accurate and complete.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 FORM D

Notice of Exempt Offering of Securities

OMB APPROVAL			
OMB Number:	3235- 0076		
Estimated average burden			
hours per response:	4.00		

1. Issuer's Identity

CIK (Filer ID Number)	Previous Names	None		Entity Type
<u>0001516912</u>	Community	Trust Financial Corp		X Corporation
Name of Issuer		F	_	Limited Partnership
Origin Bancorp, Inc.				Limited Liability Company
Jurisdiction of				General Partnership
Incorporation/Organization				Business Trust
LOUISIANA				Other (Specify)
Year of Incorporation/Organiza	ation			
X Over Five Years Ago				
Within Last Five Years (Specify Year) Yet to Be Formed				
2. Principal Place of Business and Contact	Information			
Name of Issuer				
Origin Bancorp, Inc.				
Street Address 1			Street A	ddress 2
1511 N. TRENTON STREET				
-	vince/Country			Phone Number of Issuer
RUSTON LOUISIANA	A	71270		318-242-7500
3. Related Persons				
Last Name	Firs	st Name		Middle Name
Buske Joh	ın		М.	
Street Address 1 1511 N. TRENTON STREET	Street	Address 2		
City	State/Prov	vince/Country		ZIP/PostalCode
RUSTON LO	UISIANA		71270	
Relationship: Executive Officer X Dire	ctor Promote	er		
Clarification of Response (if Necessary):				
Last Name		st Name		Middle Name
D'Agostino, Jr. Jan			S.	
Street Address 1 1511 N. TRENTON STREET	Street	Address 2		
City	State/Prov	vince/Country		ZIP/PostalCode
RUSTON LO	UISIANA		71270	
Relationship: Executive Officer X Dire	ctor Promote	er		

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Davison, Jr.	James	Е.
Street Address 1 1511 N. TRENTON STREET	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
RUSTON	LOUISIANA	71270
Relationship: Executive Officer <i>X</i>	X Director Promoter	
Clarification of Response (if Necessa	ary):	
1 (
Last Name	First Name	Middle Name
Elkins	Hez	
Street Address 1 1511 N. TRENTON STREET	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
RUSTON	LOUISIANA	71270
Relationship: Executive Officer <i>X</i>		
Clarification of Response (if Necessa	arv):	
Last Name	First Name	Middle Name
Goldstein Street Address 1	Oliver Street Address 2	
1511 N. TRENTON STREET	Street Address 2	
City	State/Province/Country	ZIP/PostalCode
RUSTON	LOUISIANA	71270
Relationship: Executive Officer X	C Director Promoter	
Clarification of Response (if Necessa	ary):	
Last Name	First Name	Middle Name
Graham	Ronald	H.
Street Address 1	Street Address 2	
1511 N. TRENTON STREET		
City	State/Province/Country	ZIP/PostalCode
RUSTON	LOUISIANA	71270
Relationship: Executive Officer <i>X</i>	K Director Promoter	
Clarification of Response (if Necessa	ary):	
Last Name	First Name	Middle Name
Jones	Michael	A.
Street Address 1	Street Address 2	
1511 N. TRENTON STREET		
City	State/Province/Country	ZIP/PostalCode
RUSTON	LOUISIANA	71270
Relationship: Executive Officer <i>X</i>	X Director Promoter	
Clarification of Response (if Necessa	ary):	
Last Name	First Name	Middle Name
Love	Jack	Р.
Street Address 1	Street Address 2	
1511 N. TRENTON STREET		
City	State/Province/Country	ZIP/PostalCode
RUSTON	LOUISIANA	71270

Relationship: Executive Officer X Director Promoter

Clarification of Response (if Necessary):

Last Name	First Name	Middle Name
Luffey	Gary	
Street Address 1	Street Address 2	
1511 N. TRENTON STREET	State/Ducyin co/Country	7ID/DestalCade
City RUSTON	State/Province/Country LOUISIANA	ZIP/PostalCode 71270
Relationship: Executive Officer X		/ 12/ 0
-		
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Malone	Farrell	
Street Address 1	Street Address 2	
1511 N. TRENTON STREET City	State/Province/Country	ZIP/PostalCode
RUSTON	LOUISIANA	71270
	L'Director Promoter	
-		
Clarification of Response (if Necessa	ry):	
Last Name	First Name	Middle Name
Mills	Drake	
Street Address 1	Street Address 2	
1511 N. TRENTON STREET		
City	State/Province/Country	ZIP/PostalCode
RUSTON	LOUISIANA	71270
Relationship: X Executive Officer 2	X Director Promoter	
Clarification of Response (if Necessa	гу):	
Last Name	Elizat Nama	Middle Name
	First Name	
Myrick	First Name F.	Ronnie
Myrick Street Address 1		
Myrick Street Address 1 1511 N. TRENTON STREET	F. Street Address 2	Ronnie
Myrick Street Address 1 1511 N. TRENTON STREET City	F. Street Address 2 State/Province/Country	Ronnie ZIP/PostalCode
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON	F. Street Address 2 State/Province/Country LOUISIANA	Ronnie
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter	Ronnie ZIP/PostalCode
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter	Ronnie ZIP/PostalCode
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Last Name	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter ry): First Name	Ronnie ZIP/PostalCode
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Last Name Pietrzak	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter ary): First Name John	Ronnie ZIP/PostalCode 71270
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Last Name Pietrzak Street Address 1	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter ry): First Name	Ronnie ZIP/PostalCode 71270
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Last Name Pietrzak Street Address 1 1511 N. TRENTON STREET	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter Ty): First Name John Street Address 2	Ronnie ZIP/PostalCode 71270 Middle Name
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Last Name Pietrzak Street Address 1 1511 N. TRENTON STREET City	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter ry): First Name John Street Address 2 State/Province/Country	Ronnie ZIP/PostalCode Middle Name ZIP/PostalCode
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Clarification of Response (if Necessa Last Name Pietrzak Street Address 1 1511 N. TRENTON STREET City RUSTON	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter Ty): First Name John Street Address 2 State/Province/Country LOUISIANA	Ronnie ZIP/PostalCode 71270 Middle Name
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Clarification of Response (if Necessa Last Name Pietrzak Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter Typ: First Name John Street Address 2 State/Province/Country LOUISIANA Director Promoter	Ronnie ZIP/PostalCode Middle Name ZIP/PostalCode
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Clarification of Response (if Necessa Last Name Pietrzak Street Address 1 1511 N. TRENTON STREET City RUSTON	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter Typ: First Name John Street Address 2 State/Province/Country LOUISIANA Director Promoter	Ronnie ZIP/PostalCode Middle Name ZIP/PostalCode
Myrick Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X Clarification of Response (if Necessa Clarification of Response (if Necessa Last Name Pietrzak Street Address 1 1511 N. TRENTON STREET City RUSTON Relationship: Executive Officer X	F. Street Address 2 State/Province/Country LOUISIANA Director Promoter Typ: First Name John Street Address 2 State/Province/Country LOUISIANA Director Promoter	Ronnie ZIP/PostalCode Middle Name ZIP/PostalCode

Street Address 1	Street Address 2		
1511 N. TRENTON STREET City	State/Dravince/Country	ZIP/PostalCode	
RUSTON	State/Province/Country LOUISIANA	71270	
		/12/0	
-	X Director Promoter		
Clarification of Response (if Necess	Sary):		
Last Name	First Name	Middle Name	
Solender	Elizabeth		
Street Address 1	Street Address 2		
1511 N. TRENTON STREET			
City	State/Province/Country	ZIP/PostalCode	
RUSTON	LOUISIANA	71270	
Relationship: Executive Officer	X Director Promoter		
Clarification of Response (if Necess	sary):		
Last Name	First Name	Middle Name	
Taylor	Steven		
Street Address 1	Street Address 2		
1511 N. TRENTON STREET			
City	State/Province/Country	ZIP/PostalCode	
RUSTON	LOUISIANA	71270	
Relationship: Executive Officer	X Director Promoter		
Clarification of Response (if Necess	sary):		
Last Name	First Name	Middle Name	
Winkler	David	L.	
Street Address 1	Street Address 2		
1511 N. TRENTON STREET			
City	State/Province/Country	ZIP/PostalCode	
RUSTON	LOUISIANA	71270	
Relationship: Executive Officer	X Director Promoter		
Clarification of Response (if Necess	sary):		
Last Name	First Name	Middle Name	
Wasson	Zach	L.	
Street Address 1 1511 N. TRENTON STREET	Street Address 2		
	State/Dravince/Country	ZIP/PostalCode	
City RUSTON	State/Province/Country LOUISIANA	ZIP/PostaiCode 71270	
RUSTON Relationship: X Executive Officer		/12/0	
Clarification of Response (if Necess			
Last Name	First Name	Middle Name	
Barham	Henry	A.	
Street Address 1	Street Address 2		
1511 N. TRENTON STREET			
City	State/Province/Country	ZIP/PostalCode	
RUSTON	LOUISIANA	71270	
Relationship: X Executive Officer		, 12, 0	
Kelationship. A Executive Officer			

4. Industry Group

Agriculture		Health Care	Retailing
Banking & Financial Services		Biotechnology	Restaurants
Commercial Banki	ng	Health Insurance	Technology
Insurance		Hospitals & Physicians	Computers
Investing Investment Bankin	g	Pharmaceuticals	Telecommunications
Pooled Investment	0	Other Health Care	Other Technology
Is the issuer registe		Manufacturing	Travel
an investment com the Investment Cor		Real Estate	Airlines & Airports
Act of 1940?	iipuiiy	Commercial	Lodging & Conventions
Yes	No	Construction	Tourism & Travel Services
X Other Banking & F	inancial Services	REITS & Finance	Other Travel
Business Services		Residential	Other
Energy		Other Real Estate	
Coal Mining			
Electric Utilities			
Energy Conservation	n		
Environmental Serv	vices		
Oil & Gas			

Other Energy

5. Issuer Size

Revenue Range	OR	Aggregate Net Asset Value Range
No Revenues		No Aggregate Net Asset Value
\$1 - \$1,000,000		\$1 - \$5,000,000
\$1,000,001 - \$5,000,000		\$5,000,001 - \$25,000,000
\$5,000,001 - \$25,000,000		\$25,000,001 - \$50,000,000
\$25,000,001 - \$100,000,000		\$50,000,001 - \$100,000,000
Over \$100,000,000		Over \$100,000,000
X Decline to Disclose		Decline to Disclose
Not Applicable		Not Applicable

6. Federal Exemption(s) and Exclusion(s) Claimed (select all that apply)

	Investment Company	y Act Section 3(c)
Rule 504(b)(1) (not (i), (ii) or (iii))	Section 3(c)(1)	Section 3(c)(9)
Rule 504 (b)(1)(i) Rule 504 (b)(1)(ii)	Section 3(c)(2)	Section 3(c)(10)
Rule 504 (b)(1)(iii)	Section 3(c)(3)	Section 3(c)(11)
Rule 505	Section 3(c)(4)	Section 3(c)(12)
X Rule 506(b)	Section 3(c)(5)	Section 3(c)(13)
Rule 506(c) Securities Act Section 4(a)(5)	Section 3(c)(6)	Section 3(c)(14)
	Section 3(c)(7)	

X New Notice Date of First Sale 2016-11-23 First Sale Amendment	Yet to Occur	
8. Duration of Offering		
Does the Issuer intend this offering to last more than one ye	ear? Yes X No	
9. Type(s) of Securities Offered (select all that apply)		
X Equity Debt Option, Warrant or Other Right to Acquire Another Secu Security to be Acquired Upon Exercise of Option, Warra Other Right to Acquire Security		
10. Business Combination Transaction		
Is this offering being made in connection with a business co a merger, acquisition or exchange offer?	ombination transaction, such as Yes X No	
Clarification of Response (if Necessary):		
11. Minimum Investment		
Minimum investment accepted from any outside investor \$	0 USD	
12. Sales Compensation		
Recipient	Recipient CRD Number None	
Stephens, Inc.	3496	
(Associated) Broker or Dealer X None	(Associated) Broker or Dealer CRD Number X None	
None	None	
Street Address 1	Street Address 2	
111 Center Street		
	6	ZIP/Postal Code
	ARKANSAS	72201
State(s) of Solicitation (select all that apply) Check "All States" or check individual States	Foreign/non-US	
CALIFORNIA ILLINOIS LOUISIANA MISSISSIPPI MISSOURI NEW JERSEY NEW YORK TEXAS		

13. Offering and Sales Amounts

Total Offering Amount\$45,000,000 USD orIndefiniteTotal Amount Sold\$45,000,000 USDorIndefiniteTotal Remaining to be Sold\$0 USD orIndefinite

Clarification of Response (if Necessary):

14. Investors

investors, and enter the number of such non-accredited investors who already have invested in the offering. Regardless of whether securities in the offering have been or may be sold to persons who do not qualify as accredited investors, enter the total number of investors who already have invested in the offering:

15. Sales Commissions & Finder's Fees Expenses

Provide separately the amounts of sales commissions and finders fees expenses, if any. If the amount of an expenditure is not known, provide an estimate and check the box next to the amount.

Sales Commissions	\$937,750 USD	Estimate
Finders' Fees	\$0 USD	Estimate

Clarification of Response (if Necessary):

16. Use of Proceeds

Provide the amount of the gross proceeds of the offering that has been or is proposed to be used for payments to any of the persons required to be named as executive officers, directors or promoters in response to Item 3 above. If the amount is unknown, provide an estimate and check the box next to the amount.

\$0 USD Estimate

Clarification of Response (if Necessary):

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and clicking SUBMIT below to file this notice.

Terms of Submission

In submitting this notice, each issuer named above is:

- Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request, in the accordance with applicable law, the information furnished to offerees.*
- Irrevocably appointing each of the Secretary of the SEC and, the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes, or (ii) the laws of the State in which the issuer maintains its principal place of business or any State in which this notice is filed.
- Certifying that, if the issuer is claiming a Regulation D exemption for the offering, the issuer is not disqualified from relying on Regulation D for one of the reasons stated in Rule 505(b)(2)(iii) or Rule 506(d).

Each Issuer identified above has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

For signature, type in the signer's name or other letters or characters adopted or authorized as the signer's signature.

Issuer	Signature	Name of Signer	Title	Date
Origin Bancorp, Inc.	/s/ Zach L. Wasson	Zach L. Wasson	Chief Financial Officer	2016-11-28

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.

* This undertaking does not affect any limits Section 102(a) of the National Securities Markets Improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-290, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this

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undertaking or otherwise and can require offering materials only to the extent NSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.