FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

| OMB APP | OMB APPROVAL | | | | | | |
|--------------------------|----------------|--|--|--|--|--|--|
| OMB Number: | ber: 3235-0104 | | | | | | |
| Estimated average burden | | | | | | | |
| 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* Hall Martin Lance 2. Date of Event Requiring Statement (Month/Day/Year) 05/08/2018 | | | | nent | 3. Issuer Name and Ticker or Trading Symbol Origin Bancorp, Inc. [OBNK] | | | | | | | |
|---|---------|----------|--|--------------------|--|--|--|------------------------------|---|--|---|--|
| (Last) | (First) | (Middle) | | | | onship of Reporting Perso all applicable) Director | on(s) to Issuer | | 5. If Amendment, Date of Original Filed (Month/Day/Year) | | | |
| | | | | | X | Officer (give title below) | Other (specify below) | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | |
| (Street) | | | | | Chief Operating Officer | | | | X Form filed by One Reporting Person | | | |
| RUSTON | LA | 71270 | | | | | | | | Form filed b Reporting P | y More than One erson | |
| (City) | (State) | (Zip) | | | | | | | | | | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | | | | lly Owned (Instr. 4) | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | | |
| Common Stock | | | | | | 11,732 | D | | | | | |
| Common Stock | | | | | | 26,605 | I | | BY ISSUER ESOP | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | |
| | | | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | d 3. Title and Amount of Secur Underlying Derivative Securi | | rity (Instr. 4) Con | | version xercise | 5. Ownership Form: Direct (D) | 6. Nature of Indirect Beneficial Ownership (Instr. 5) | |
| | | | Date Exercisable | Expiration Date | 1 Title | | Amount or Number of Shares | Price of Deriva Securi | tive | or Indirect (I) (Instr. 5) | | |

Explanation of Responses:

Remarks:

/s/ Drake Mills, as Attorney-in-05/08/2018

Fact

** 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 5 (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.