Home Federal Bancorp, Inc. of Louisiana Form 4/A February 14, 2014

FORM 4

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

OMB

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

3235-0287 Number: January 31, Expires:

OMB APPROVAL

SECURITIES Section 16. Form 4 or

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Form 5 obligations may continue. See Instruction

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

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1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * BARLOW JAMES R			2. Issuer Name and Ticker or Trading Symbol Home Federal Bancorp, Inc. of Louisiana [HFBL]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)
(Last) C/O HOME MARKET S'		(Middle) BANK, 624	3. Date of Earliest Transaction (Month/Day/Year) 01/31/2014	_X_ Director 10% Owner _X_ Officer (give title Other (specify below) President & COO*
SHREVEPO	(Street) PRT, LA 71	101	4. If Amendment, Date Original Filed(Month/Day/Year) 02/04/2014	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person
(City)	(State)	(Zip)	Table I - Non-Derivative Securities Ac	anired. Disposed of, or Reneficially Owned

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	Execution Date, if any	3. Transaction Code	on(A) or D (D)	ispose	d of	5. Amount of Securities Beneficially	6. Ownership Form: Direct (D) or	Indirect Beneficial
		(Month/Day/Year)	(Instr. 8)	(Instr. 3,	4 and	5)	Owned	Indirect (I)	Ownership
							Following	(Instr. 4)	(Instr. 4)
					(A)		Reported		
					or		Transaction(s)		
			Code V	Amount	(D)	Price	(Instr. 3 and 4)		
Common Stock	01/31/2014		F(1)	667	D	\$ 17.6	22,314 (2)	D	

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

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Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)			ate	7. Title Amoun Under	int of lying ities	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene
	Derivative Security				Securities Acquired			(Instr.	3 and 4)		Owne Follo
					(A) or Disposed						Repo Trans
					of (D) (Instr. 3, 4, and 5)						(Instr
					4, and 3)				Amount		
						Date Exercisable	Expiration Date	Title	or Number of		
				Code V	(A) (D)				Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
BARLOW JAMES R C/O HOME FEDERAL BANK 624 MARKET STREET SHREVEPORT, LA 71101	X		President & COO*					

Signatures

/s/James R.
Barlow

**Signature of Reporting Person

Date

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).
- (1) The reporting person is amending the Form 4 for the purpose of correcting the number of shares withheld to meet tax obligation for distribution from Recognition and Retention Plan.
- Includes 11,672 shares held in the 2011 Recognition and Retention Plan Trust which reflect the unvested portion of a grant award originally covering 19,452 shares that commenced vesting at a rate of 20% per year on January 31, 2013 and 1,125 shares held in the 2005 Recognition and Retention Plan Trust which reflect the unvested portion of a grant award originally covering 2,808 shares that commenced vesting at a rate of 20% per year commencing on August 19, 2011.

Remarks:

* Also serves as President and Chief Executive Officer of the Issuer's wholly owned subsidiary, Home Federal Bank.

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.

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