FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF **SECURITIES**

OMB APPROVAL							
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Miller Laura Marie			2. Date of Event Requiring Statement Month/Day/Year) 01/01/2019 3. Issuer Name and Ticker or Trading Symbol LGI Homes, Inc. [LGIH]								
(Last) (First) (Middle) 1450 LAKE ROBBINS DRIVE, SUITE 430					ationship of Reporting Perso call applicable) Director	•		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) THE WOODLAN		77380				Officer (give title below)	Other (sp below)	pecify		icable Line) Form filed b	/Group Filing (Check y One Reporting Person y More than One erson
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)						unt of Securities ially Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock						0	D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)											
1. Title of Derivative Security (Instr. 4)		2. Date Exercisable an Expiration Date (Month/Day/Year)		d 3. Title and Amount of Secur Underlying Derivative Securi		ty (Instr. 4) Conve		rcise Fo	Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	n Title	a	Amount or Number of Shares	Secur	ative	Direct (D) or Indirect (I) (Instr. 5)	

Explanation of Responses:

Remarks:

01/10/2019 /s/ Laura Marie Miller

** 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.