FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT O	F CHANGES	IN BENEFICIAL	<b>OWNERSHIP</b>

l	OMB APPRO	VAL
	OMB Number:	3235-0287
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b)

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*     Kesler Jeff																heck	ationship of Repor all applicable) Director Officer (give title		ting Person(s) to Iss 10% O		wner	
	RITEX HO	irst) LDINGS, INC. ER DRIVE, SU	(Middle)  ITE 400			3. Date of Earliest Transaction (Month/Day/Year) 01/01/2016									X	below)  Chief Lendi			below)			
(Street) DALLAS TX 75225  (City) (State) (Zip)					-	If Amendment, Date of Original Filed (Month/Day/Year)  tive Securities Acquired, Disposed of, or Benefice									Li	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person  Form filed by More than One Reporting Person						
1. Title of Security (Instr. 3)  2. Transa Date (Month/D			action	ction 2A. Deemed Execution Date,			, 3, Ti C	3. 4. Securities Transaction Code (Instr. 5)		ties Acquired (A) or d Of (D) (Instr. 3, 4 ar			5. Amou Securiti Benefic Owned		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
									С	ode	v	Amount	(A) or (D) Pri		Price		Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Common Stock 01/01/					1/2016	2016			М		1,037		A	\$(	)	19	,217		D			
Common Stock 01/01				1/2016	2016			F		338 D		D	\$16	.21	18,879			D				
		7	able II -									sed of, onverti					wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security  3. Transaction Date (Month/Day/Year)		Execution Date, If any			Transaction Code (Instr.		ı of E		6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		l Security	De Se (In	Price of crivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly [	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable		xpiration ate	Title	- 1	Amount or Number of Shares							
Restricted Stock Units	(1)	01/01/2016			M			1,037		(2)		(2)		nmon ock	1,037		\$0	2,073		D		
Employee Stock Option (right to	\$16.21	01/01/2016			A			7,332		(3)	01	1/01/2026		nmon ock	7,332		\$0	7,332		D		

## **Explanation of Responses:**

- 1. Each restricted stock unit represents a right to receive at settlement one share of common stock of the Company.
- 2. On January 1, 2015 the reporting person was granted an award of 3,110 restricted stock units subject to certain terms and conditions that was not required to be reported. The number of restricted stock units eligible for vesting was based on certain performance objectives and market conditions as of December 31, 2015 and determined on January 1, 2016. The performance objectives and market conditions were met for 2015, resulting in the eligibility for vesting of all 3,110 restricted stock units. The restricted stock units vest in three equal annual installments beginning January 1, 2016 and 1,037 of the vested units were settled through the delivery of shares on January 1, 2016.
- 3. The option vests in three equal annual installments beginning January 1, 2017.

/s/ C. Malcolm Holland, III, by 01/05/2016 power of attorney

\*\* 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.

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.