FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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* WILLIAM FALLON			Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 05/21/2020 3. Issuer Name and Ticker or Trading Symbol Veritex Holdings, Inc. [VBTX]							
(Last) (First) (Middle) 8214 WESTCHESTER DR. SUITE					Relationship of Reporting Person(s) to Issuer (Check all applicable)				5. If Amendment, Date of Original Filed (Month/Day/Year)		
800					X Director Officer (give title below)	10% C Other below)	(specify	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting			
(Street) DALLAS	TX	75225							Person	by More than One Person	
(City)	(State)	(Zip)									
Table I - Non-Derivative Securities Beneficially Owned											
1. Title of Security (Instr. 4)											
1. Title of Sec	curity (Instr. 4)			2. Amount of Securities Beneficially Owned (Instr. 4)	3. Owner Form: I (D) or II (I) (Inst	Direct ndirect		ature of Indire ership (Instr.		
1. Title of Sec)			Beneficially Owned (Instr.	Form: I (D) or II (I) (Inst	Direct ndirect				
) Derivative	Beneficially Owned (Instr. 4)	Form: I (D) or II (I) (Inst	Direct ndirect r. 5)	Own			
	ock	(e.g.		Derivative ls, warran	Beneficially Owned (Instr. 4) 6,500 Securities Beneficia	Form: I (D) or II (I) (Inst Ally Owr ible sec	Direct ndirect r. 5)) sion			

Explanation of Responses:

Remarks:

C. Malcolm Holland

06/08/2020

** Signature of Reporting

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.