## Edgar Filing: Addus HomeCare Corp - Form 4

Addus Home	Care Corp										
Form 4	16										
March 17, 20									OMB A	PPROVAL	
FORM	<b>4</b> UNITED	STATES			AND EX , D.C. 20		NGE (	COMMISSION		3235-0287	
Check thi if no long subject to	this box onger t to STATEMENT OF CHANGES IN BEN					ENEFICIAL OWNERSHIP OF				Estimated average	
Section 10 Form 4 or				SECO	<b>MILD</b>				burden hours per response 0.		
Form 5 obligation may conti <i>See</i> Instru 1(b).	inue. Section 17	(a) of the		ility Hol	ding Con	npany	Act o	ge Act of 1934, f 1935 or Sectio 40	·	0.0	
(Print or Type R	Responses)										
Hochhauser Maxine Symbo			Symbol		Ticker or		-	5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First) (	Middle)	3. Date of		1-		.1	(Cheo	ck all applicable	e)	
. ,	RENVILLE RD.		(Month/Da 03/15/20	ay/Year)	Tansaction			Director X_Officer (give below)		6 Owner er (specify cer	
			Amendment, Date Original (Month/Day/Year)				<ul> <li>6. Individual or Joint/Group Filing(Check</li> <li>Applicable Line)</li> <li>_X_ Form filed by One Reporting Person</li> </ul>				
DOWNERS	GROVE, IL 60	515							More than One Re		
(City)	(State)	(Zip)	Table	e I - Non-I	Derivative	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	<ul> <li>Execution</li> <li>any</li> </ul>		Code (Instr. 8)	<ol> <li>4. SecurionAcquired</li> <li>Disposed</li> <li>(Instr. 3,</li> <li>7 Amount</li> </ol>	d (A) o d of (D 4 and (A) or	)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	03/15/2016			A	4,375	A	\$ 0	24,375	D		

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

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 control number.

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

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

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## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
Hochhauser Maxine 2300 WARRENVILLE RD. DOWNERS GROVE, IL 60515			Chief Operating Officer				
Signatures							
101 Marina							

/s/ Maxine	
Hochhauser	03/17/2016
<u>**</u> 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 shares vest in three equal installments on each of the first three anniversaries of the grant date.

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.