### Edgar Filing: Addus HomeCare Corp - Form 4

| Addus Home                                   | Care Corp        |  |                    |  |                    |         |   |   |                         |                 |  |
|--|------------------|--|--------------------|--|--------------------|---------|---|---|-------------------------|-----------------|--|
| Form 4                                       |                  |  |                    |  |                    |         |   |   |                         |                 |  |
| March 18, 20                                 | 14               |  |                    |  |                    |         |   |   |                         |                 |  |
| FORM   | <b></b>          |  |                    |  |                    |         |   |   | OMB A                   | PPROVAL         |  |
|  | UNITE            | D STATES                               |                    |  | ND EXC<br>D.C. 205 |         | NGE C   | COMMISSION  | OMB<br>Number:          | 3235-0287       |  |
| Check this                                   | 0r               |  |                    |  |                    |         |   |   | Expires:                | January 31,     |  |
| if no longer<br>subject to STATEMENT OF CHAN |                  |  |                    | GES IN BENEFICIAL OWNE                             |                    |         |   | NERSHIP OF  | Estimated a             | 2005<br>average |  |
| Section 16.                                  |                  |  |                    | SECUR  | RITIES             |         |   |   | burden hours per        |                 |  |
|  | Form 4 or        |  |                    |  |                    |         |   | response 0.5  |                         |                 |  |
| Form 5<br>obligation                         | • • • •          |  |                    |  |                    |         | •   | e Act of 1934,  |                         |                 |  |
| may conti                                    |                  |  |                    | •  | •                  | • •     |   | 1935 or Section   | n                       |                 |  |
| <i>See</i> Instru 1(b).                      | ction            | 30(h)                                  | of the In          | vestment   | Company            | y Act   | of 194  | 0   |                         |                 |  |
| (Print or Type R                             | lesponses)       |  |                    |  |                    |         |   |   |                         |                 |  |
| Meulemans Dennis Symbol                      |                  |  |                    | . Issuer Name <b>and</b> Ticker or Trading<br>mbol |                    |         |   | 5. Relationship of Reporting Person(s) to<br>Issuer<br>(Check all applicable) |                         |                 |  |
|  |                  |  |                    | HomeCare Corp [ADUS]                               |                    |         |   |   |                         |                 |  |
| (Last)                                       | (First)          | (Middle)                               | 3. Date of         | Earliest Ti  | ransaction         |         |   | (Check  | k all applicable        | <i>;</i> )      |  |
| (Month/Da                                    |                  |  |                    | Day/Year)  |                    |         |   | Director 10% Owner  |                         |                 |  |
| 2401 SOUT                                    | H PLUM GRC       | <b>DVE</b>                             | 03/14/20           | 014  |                    |         |   | X Officer (give below)  | title Other below)      | er (specify     |  |
| ROAD   |                  |  |                    |  |                    |         |   | · · · · · · · · · · · · · · · · · · ·   | Financial Offic         | er              |  |
|  | (Street)         |  | 4 If Ame           | ndment Da  | ate Original       |         |   | 6 Individual or Io  | int/Group Filir         | or (Check       |  |
| · · · · · · · · · · · · · · · · · · ·        |                  |  | Aonth/Day/Year)    |  |                    |         | 6. Individual or Joint/Group Filing(Check<br>Applicable Line) |   |                         |                 |  |
|  |                  |  | ,                  | ·  | ,<br>              |         |   | _X_ Form filed by C   |                         |                 |  |
| PALATINE,                                    | , IL 60067       |  |                    |  |                    |         |   | Form filed by M<br>Person   | Iore than One Re        | porting         |  |
| (City)                                       | (State)          | (Zip)                                  | Tabl               | e I - Non-I  | Derivative S       | Securit | ties Acq  | uired, Disposed of  | , or Beneficial         | ly Owned        |  |
| 1.Title of                                   | 2. Transaction D |  |                    | 3.   | 4. Securit         |         |   | 5. Amount of  | 6. Ownership            |                 |  |
| Security                                     | (Month/Day/Yea   | Month/Day/Year) Execution Date, if any |                    |  | on(A) or Dis       | -       |   |   | Form: Direct            |                 |  |
| (Instr. 3)                                   |                  | Day/Year)                              | Code<br>(Instr. 8) | (Instr. 3, 4                                       | + and z            | ))      | Beneficially<br>Owned   |   | Beneficial<br>Ownership |                 |  |
|  |                  | (11101111)1                            | , i cui)           | (1115411-0)  |                    |         |   | Following   | (Instr. 4)              | (Instr. 4)      |  |
|  |                  |  |                    |  |                    | (A)     |   | Reported  |                         |                 |  |
|  |                  |  |                    |  |                    | or      |   | Transaction(s) (Instr. 3 and 4)   |                         |                 |  |
|  |                  |  |                    | Code V   | Amount             | (D)     | Price   | (msu. 5 and 4)  |                         |                 |  |
| Common<br>Stock                              | 03/14/2014       |  |                    | М  | 30,000             | А       | \$<br>4.06  | 55,275  | 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<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date, if<br>any<br>(Month/Day/Year) | 4.<br>Transactio<br>Code<br>(Instr. 8) | orDerivative<br>Securities |        | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    | 7. Title and Amount of<br>Underlying Securities<br>(Instr. 3 and 4) |                                     |
|---|---|---|---|--|----------------------------|--------|--|--------------------|---|-------------------------------------|
|   |   |   |   | Code V                                 | (A)                        | (D)    | Date<br>Exercisable  | Expiration<br>Date | Title   | Amount<br>or<br>Number<br>of Shares |
| Employee<br>Stock<br>Option<br>(right to<br>buy)    | \$ 4.06   | 03/14/2014                              |   | М                                      |                            | 30,000 | <u>(1)</u>   | 11/29/2020         | Common<br>Stock   | 30,000                              |

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# **Reporting Owners**

| Reporting Owner Name / Address                                       | Relationships |           |                               |       |  |  |  |
|--|---------------|-----------|-------------------------------|-------|--|--|--|
|  | Director      | 10% Owner | Officer                       | Other |  |  |  |
| Meulemans Dennis<br>2401 SOUTH PLUM GROVE ROAD<br>PALATINE, IL 60067 |               |           | Chief<br>Financial<br>Officer |       |  |  |  |

## **Signatures**

Reporting Person

/s/ Dennis 03/18/2014 Meulemans \*\*Signature of 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).
- 15,000 of the employee stock options vested on November 29, 2011 and 15,000 of the employee stock options vested on November 29, (1) 2012.
- 15,000 of the remaining employee stock options vested on November 29, 2013 and the remaining 30,000 employee stock options will (2) vest 50% on November 29, 2014 and 50% November 29, 2015.

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.