FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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*     Heaney Mark S.						2. Issuer Name and Ticker or Trading Symbol Addus HomeCare Corp [ ADUS ]								eck all appli	or		10% Owner	
(Last) (First) (Middle) 2401 SOUTH PLUM GROVE ROAD						3. Date of Earliest Transaction (Month/Day/Year) 04/04/2014								X Officer (give title Other (specify below)  President and CEO				pecify
(Street) PALATINE IL 60067 (City) (State) (Zip)					4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person				
		Tab	ole I - Nor	n-Deriv	ativ	e Se	curities	s Ac	quired,	Dis	posed c	of, or Be	neficial	ly Owned	I			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						Execution Date,			Transaction Dispo		Disposed	rities Acquired (A) or ed Of (D) (Instr. 3, 4 a		Benefici	es ally Following	Form (D) o	n: Direct r Indirect estr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount	(A) or (D)	Price	Transac	action(s) 3 and 4)			
		-	Table II -									or Bend ble secu		Owned				Α.
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		4. Transaction Code (Instr. 8)		of		6. Date Ex Expiration (Month/Da	Date	:	d 7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)
					Code	v	(A)		Date Exercisab		Expiration Date	Title	Amount or Number of Shares					
Employee Stock Option (right to	\$23.1	04/04/2014			A		17,850		(1)	0	)4/04/2024	Common Stock	17,850	\$0.00	17,850	0	D	

## **Explanation of Responses:**

1. One third of the options vest on the first three anniversaries of the grant date.

## Remarks:

/s/ Mark S. Heaney

04/08/2014

\*\* Signature of Reporting Person

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.