FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* GAFFNEY SEAN					2. Issuer Name and Ticker or Trading Symbol Addus HomeCare Corp [ADUS]										all app Direc	licable) tor			Owner	
(Last) 6303 CC	(Fii	,	3. Date of Earliest Transaction (Month/Day/Year) 02/23/2024									X	below	,	Other (sp below) Legal Officer		specify			
SUITE 600					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable ine)						
(Street) FRISCO TX 75034																	e Reporting Person re than One Reporting			
(City)	(St	ate) (2	Zip)		Rule 10b5-1(c) Transaction Indication															
										cate that a transaction was made pursuant to a contract, instruction or written plan that is intended to defense conditions of Rule 10b5-1(c). See Instruction 10.										
		Table	I - No	on-Deriva	tive	Secu	rities	Acc	quirec	d, Dis	sposed of	, or E	Benefic	ially	Own	ed				
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/				.	Execu if any	eemed ition Date, h/Day/Year)					Acquired (A) of (D) (Instr. 3, 4			Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price		Transa	saction(s) r. 3 and 4)			(Instr. 4)	
Common Stock 02/23/20)24			A	Ш	5,657(1)	A	\$0.	00		19,641		D			
Common Stock 02/26/20)24			S ⁽²⁾		1,639	D	\$85.	95 ⁽³⁾	18,002		D				
		Tal	ble II								osed of, convertib				Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		vative vrities vired or osed vr. 3, 4	6. Date Exercisab Expiration Date (Month/Day/Year)		ate	Amount of		Der Sec (Ins	ivative urity tr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						v	(A) (D)		Date Exercisabl		Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

- 1. The shares vest in equal installments on each of February 23, 2025, February 23, 2026, and February 23, 2027, subject to customary provisions for continued service and acceleration on a change in control
- 2. This transaction reflects the sale of shares, made pursuant to a previously established 10b5-1 plan, for the purpose of satisfying tax obligations due upon the vesting of restricted stock awards granted by the Issuer
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$85.94 to \$85.96, inclusive. The reporting person undertakes to provide to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (3) to this Form 4.

/s/ Brian Poff, Attorney-in-Fact for Sean Gaffney

02/27/2024

** 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.