LHC Group, Inc Form 4 August 20, 2014

## FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** Form 4 or Form 5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction 1(b).

#### **OMB APPROVAL**

**OMB** 3235-0287 Number:

January 31, Expires: 2005 Estimated average

burden hours per response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting Person \* Coliseum Capital Management, LLC

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to Issuer

(Last)

(City)

(First)

(Middle)

(Zip)

LHC Group, Inc [LHCG]

3. Date of Earliest Transaction

(Month/Day/Year) 08/19/2014

(Check all applicable)

X\_ Director X\_\_ 10% Owner Other (specify Officer (give title below)

METRO CENTER, 1 STATION PLACE, 7TH FLOOR SOUTH

(State)

(Street)

4. If Amendment, Date Original

Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check

Applicable Line)

Form filed by One Reporting Person X\_ Form filed by More than One Reporting

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

#### STAMFORD, CT 06902

		- 440			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			01 201101101111	.,
1.Title of Security	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if	3. Transactio	4. Securitie	•	` ′	5. Amount of Securities	6. Ownership	7. Nature of Indirect
(Instr. 3)	(ITOMAL Degri Teal)	any (Month/Day/Year)	Code (Instr. 8)	(Instr. 3, 4	,		Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
			Code V	Amount	(D)	Price	(Instr. 5 and 1)		
Common Stock	08/18/2014		S	158,011 (1)	D	\$ 25.6 (1)	2,405,507 (1)	I	See Footnote (1)
Common Stock	08/20/2014		S	62,000 (1)	D	\$ 25.32 (1)	2,343,507 (1)	I	See Footnote (1)

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

Persons who respond to the collection of **SEC 1474** information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

### Edgar Filing: LHC Group, Inc - Form 4

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

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transact	5. orNumber	6. Date Exerc Expiration D		7. Titl Amou		8. Price of Derivative	9. Nu Deriv	
Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui	
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivativ	e		Secur	ities	(Instr. 5)	Bene	
	Derivative				Securities	;		(Instr.	3 and 4)		Owne	
	Security				Acquired						Follo	
					(A) or						Repo	
					Disposed						Trans	
					of (D)						(Instr	
					(Instr. 3,							
					4, and 5)							
									Amount			
									Amount			
						Date	Expiration	Title	or Number			
						Exercisable	Date			of		
				Code V	(A) (D)				Shares			
				Code v	(A)(D)				Shares			

# **Reporting Owners**

Reporting Owner Name / Address	Relationships					
Treporting of the Common Common	Director	10% Owner	Officer	Other		
Coliseum Capital Management, LLC METRO CENTER 1 STATION PLACE, 7TH FLOOR SOUTH STAMFORD, CT 06902	X	X				
Shackelton Christopher S METRO CENTER 1 STATION PLACE, 7TH FLOOR SOUTH STAMFORD, CT 06902	X	X				
Coliseum Capital, LLC METRO CENTER 1 STATION PLACE, 7TH FLOOR SOUTH STAMFORD, CT 06902	X	X				
COLISEUM CAPITAL PARTNERS L P METRO CENTER 1 STATION PLACE, 7TH FLOOR SOUTH STAMFORD, CT 06902	X	X				
Coliseum Capital Partners II, L.P. METRO CENTER 1 STATION PLACE, 7TH FLOOR SOUTH STAMFORD, CT 06902		X				
Gray Adam METRO CENTER 1 STATION PLACE, 7TH FLOOR SOUTH STAMFORD, CT 06902	X	X				

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BLACKWELL PARTNERS LLC C/O DUMAC, LLC 280 SOUTH MANGUM STREET, SUITE 210 DURHAM, NC 27701



## **Signatures**

/s/ Christopher Shackelton	08/20/2014				
**Signature of Reporting Person	Date				
Coliseum Capital Management, LLC, By: /s/ Christopher Shackelton, Manager					
**Signature of Reporting Person	Date				
Coliseum Capital, LLC, By: Christopher Shackelton, Manager					
**Signature of Reporting Person	Date				
Coliseum Capital Partners, L.P., By: Coliseum Capital, LLC, its General Partner, By: Christopher Shackelton, Manager					
**Signature of Reporting Person	Date				
Coliseum Capital Partners II, L.P., By: Coliseum Capital, LLC, its General Partner, By: Christopher Shackelton, Manager	08/20/2014				
**Signature of Reporting Person	Date				
Blackwell Partners, LLC, By: Coliseum Capital Management, LLC, its Attorney-in-fact, By: Christopher Shackelton, Manager					
**Signature of Reporting Person	Date				
/s/ Adam Gray	08/20/2014				
**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) See Joint Filer Information on Exhibit 99.1 for information with respect to the nature of Coliseum Capital Management, LLC's indirect ownership and details regarding the transactions reported herein and the nature of the beneficial ownership of the reporting persons.

### **Remarks:**

Christopher Shackelton is a director of the Issuer. As a result, Coliseum Capital, LLC, Coliseum Capital Partners, L.P., Colise Management and Adam Gray may be deemed directors by deputization of the Issuer solely for purposes of Section 16 of the Sexchange Act of 1934, as amended.

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.

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