CHEMED CORP Form 4 January 28, 2016

FORM 4

Check this box

if no longer

subject to

Section 16.

Form 4 or

obligations

may continue.

See Instruction

Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading **GRACE PATRICK P** Issuer Symbol CHEMED CORP [CHE] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) _X__ Director 10% Owner Other (specify Officer (give title 71 EAST 77TH ST, 4C/5C 01/27/2016 below) (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting NEW YORK, NY 10075 Person

| (City) | (State) | (Zip) Ta | ble I - Non | -Derivati | ve Sec | urities Acc | quired, Disposed (| of, or Beneficial | ly Owned |
|--------------------------------------|---|----------|--|---|------------|-----------------|--|--|---|
| 1.Title of Security (Instr. 3) | (Month/Day/Year) Execution Date, if any | | 3. Transactio Code (Instr. 8) | Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) | | | 5. Amount of Securities Beneficially Owned Following Reported | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
| capital stock | 01/27/2016 | | Code V | Amount 50 | (A) or (D) | Price \$ 138.98 | Transaction(s) (Instr. 3 and 4) 4,522 | D | |

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.

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

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January 31,

2005

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OMB

Number:

Expires:

response...

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| 1. Title of Derivative | 2. Conversion | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if | 4. Transactio | 5. orNumber | 6. Date Exerc Expiration D | | 7. Title and Amount of | | 9. Nu Deriv |
|------------------------|---|--------------------------------------|-------------------------------|------------------|--|-------------------------------|--------------------|---|---------------------|---|
| Security (Instr. 3) | or Exercise Price of Derivative Security | (2.20.11.2.3) | any (Month/Day/Year) | Code (Instr. 8) | of Derivativ Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | (Month/Day/ re s | | Underlying Securities (Instr. 3 and | Security (Instr. 5) | Secur Bene Owne Follo Repo Trans (Instr |
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title Amo or Num of Share | ber | |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|---|---------------|-----------|---------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| GRACE PATRICK P 71 EAST 77TH ST 4C/5C NEW YORK, NY 10075 | X | | | | | |

Signatures

Patrick P. Grace 01/28/2016

**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).

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.

Reporting Owners 2