SEC Form 4

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

| | | | or bestion bo(n) of the investment boinpany rist of 1940 | | | | | | |
|--|----------------------------|---------------------|---|------------------------|--|--|--|--|--|
| 1. Name and Address of Reporting Person* WILLIAMS DAVID PATRICK | | | 2. Issuer Name and Ticker or Trading Symbol <u>CHEMED CORP</u> [CHE] | | ationship of Reporting Pe k all applicable) Director | 10% Owner | | | |
| (Last) 2600 CHEMED | (First) (Middle) CENTER | | 3. Date of Earliest Transaction (Month/Day/Year) 11/10/2023 | X | Officer (give title below) executive vice preside | Other (specify below) dent & CFO | | | |
| 255 EAST FIFTH STREET | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | , | | | | |
| (Street) | | | | | | • | | | |
| CINCINNATI | OH | 45202 | | | Form filed by More that Person | an One Reporting | | | |
| (City) | (State) | (Zip) | Rule 10b5-1(c) Transaction Indication | | | | | | |
| | | | Check this box to indicate that a transaction was made pursuant a satisfy the affirmative defense conditions of Rule 10b5-1(c). See | | | an that is intended to | | | |
| | 1 | able I - Non-Deriva | tive Securities Acquired, Disposed of, or Bene | ficially | v Owned | | | | |

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | Transaction Code (Instr. | | 4. Securities Disposed Of | | | 5. Amount of Securities Beneficially Owned Following | Form: Direct (D) or Indirect (I) (Instr. 4) | Ownership |
|---------------------------------|--|---|-----------------------------|---|------------------------------|---------------|--------------------------------|---|---|------------|
| | | | Code | v | Amount | (A) or (D) | Price | Reported Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| capital stock | 11/10/2023 | | S | | 5,000 | D | \$580.79 ⁽¹⁾ | 10,826 | D | |

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

| | 1 | 1 | | - | | 1 | | | | 1 | | | | | |
|---|---|--|---|------------------------------|---|--|--|---------------------|--------------------|-------------------------|--|---|--|--|--|
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 3A. Deemed Execution Date, if any (Month/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) of Dispo of (D) (Instr | 5. Number of Expiration Date Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | ite | Amount of Securities | | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$580.50 to \$581.00. The reporting person undertakes to provide to Chemed Corporation, any security holder of Chemed Corporation, or staff of the SEC, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnote (1) to this Form 4.

Remarks:

David P. Williams

<u>11/13/2023</u>

** 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.

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).