\square

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| Check this box if no longer subject to |) |
|--|---|
| Section 16. Form 4 or Form 5 | |
| obligations may continue. See | |
| Instruction 1(b). | |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

| hours per response: | 0.5 |
|--------------------------|-----|
| Estimated average burden | |

| 1. Name and Address of Reporting Person* <u>OTOOLE TIMOTHY S</u> | | | 2. Issuer Name and Ticker or Trading Symbol <u>CHEMED CORP</u> [CHE] | | tionship of Reporting Pers all applicable) Director | 10% Owner | |
|---|---------------|----------------|--|------------------------|---|---|--|
| (Last) 2600 CHEMED 255 EAST 5TH | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/18/2011 | X | Officer (give title below) executive vice p | Other (specify below) e president | |
| (Street) CINCINNATI (City) | OH (State) | 45202 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) X | idual or Joint/Group Filing (Check Applicabl Form filed by One Reporting Person Form filed by More than One Reporting Person | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (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) |
|---------------------------------|--|---|---|--|--------|---------------|---------|---|---|---|
| | | | Code V | | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | |
| capital stock | 02/18/2011 | | A ⁽¹⁾ | | 3,790 | A | \$65.17 | 53,927 | D | |
| capital stock | 02/18/2011 | | A ⁽²⁾ | | 4,600 | A | \$65.17 | 58,527 | D | |

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

| 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 Derivati Securiti Acquire (A) or Dispose of (D) (I | Derivative (Month/Day/Year) Securities Acquired | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 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 | | | | |
| stock option(right to buy with tandem tax withholding) | \$65.17 | 02/18/2011 | | A ⁽³⁾ | | 35,000 | | 02/18/2012 | 02/18/2021 | capital stock | 35,000 | \$65.17 | 162,084 | D | |

Explanation of Responses:

1. award of restricted stock vesting in full 2/18/2015.

2. award of LTIP restricted stock vesting in full 2/18/2015.

3. exercisable in 3 equal annual installments commencing 2/18/2012.

Remarks:

Timothy S. O'Toole

** Signature of Reporting Person

<u>02/22/2011</u> 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.