## FORM 5

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

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

## **ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

OMB APPROVAL								
OMB Number: 3235-036								
Estimated average burden								
hours per response:	1.0							

Instruction 1(b).

Form 3	Holaings Repo	rtea.																	
Form 4	Transactions F	Reported.	File	ed pursuant to or Section					ities Excha ompany A			1934							
1. Name and Address of Reporting Person*  LEE SPENCER S  (Last) (First) (Middle)  2500 CHEMED CENTER				2. Issuer Name and Ticker or Trading Symbol CHEMED CORP [ CHE ]  3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2015						(0	Relationship of Reporting Check all applicable) Director X Officer (give title below) executive vie			9	g Person(s) to Issuer  10% Owner Other (specify below)  ice president				
255 EAS' (Street) CINCINI	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individ ne) X	,										
(City)	(St		<sup>Zip)</sup> <b>e I - Non-Deri</b> \	rative Sec	uritie	es Ac	auire	ed. Dis	sposed	of. o	or Bo	eneficia	ally O	wne	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any		3. Transaction Code (Instr.		4. Securities Acquired (A) or Dispos (D) (Instr. 3, 4 and 5)				sed Of 5. Am Secur Bene		nount of rities ficially		ership 1: Direct	7. Nature of Indirect Beneficial				
				(Month/Day/Year)		8)		Amount		(A) or (D)	Price		Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		Fiscal	(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)	
capital stock			12/14/2015		G			95		D		\$149.79		44,587		D			
		Та	ble II - Derivat (e.g., p	ive Secur uts, calls,									y Ow	ned					
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. Transaction Code (Instr. 8)	5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	rative rities ired r osed )	Expir (Mon	te Exercisable and ration Date th/Day/Year)  Expiration cisable Date		or Numb of		of es ing ve / (Instr. 3	8. Prio Deriva Secur (Instr.	itive ity	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	

**Explanation of Responses:** 

Remarks:

Spencer S. Lee

03/11/2016

\*\* Signature of Reporting Person

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.