FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB AF	PPROVAL
OMB Number:	3235-028

37 Estimated average burden hours per response: 0.5

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

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

					or	Section	on 30(n)	of the	investme	ent Co	mpany Act	of 194	40								
1. Name and Address of Reporting Person* MCNAMARA KEVIN J						2. Issuer Name and Ticker or Trading Symbol CHEMED CORP [CHE]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
MCNA	MAKA	KEVIN J								_ ,					X	Direc	ctor	1	0% O	wner	
(Last) (First) (Middle)						Date of Earliest Transaction (Month/Day/Year)										Offic	er (give title w)		Other (specify below)		
2600 CHEMED CENTER						03/03/2017									president and CEO						
	T 5TH ST																				
255 EAS	1 51 11 5.	KEEI								. = ::	1/14 /1/5	0.4		-			1:40	E.I. (O)		P 11	
(Street)					- 4. 11	If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)						
CINCINI	NATI (ЭH	45202												X Form filed by One Reporting Person						
					-											Forn Pers	n filed by Mor on	e than One	Repo	orting	
(City)	(State)	(Zip)													. 0.0					
		Та	ble I - No	n-Deriv	/ative	Se	curitie	s Ac	quired	, Dis	posed o	f, oı	Ber	neficia	ally (Owne	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					ır) E	A. Deemed xecution Date, any //onth/Day/Year)					es Acquired (A) o Of (D) (Instr. 3, 4			and 5) Secu Bene Owne		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(4	A) or D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
capital stock 03/03/2					/2017	2017		S		7,000		D	\$181	1.74 149		9,191 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 Exercis Price of Derivative Security		te Execution		n Date, Transaci Code (In				6. Date I Expirati (Month/I	on Da		e and Amount of Securities Underlying Derivative Security (Instrand 4)		f g		vative irity r. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Owners Form: Direct (or Indir (I) (Inst	D) ect	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nu of	ımber							

Explanation of Responses:

Remarks:

Kevin J. McNamara

03/03/2017

** 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.