FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	AIND		IANGE	COMMINIS	•
Machinaton	$D \subset \mathcal{D}$	05/10			

OIVID APPROVAL									
OMB Number:	3235-0287								
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*			2. Issuer Name and Ticker or Trading Symbol CHEMED CORP [ CHE ]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)										
LINDELL ANDREA R											1	Direc	tor		10% O	wner			
(Last) 2008 CE	(Fir	•	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 08/16/2024								Officer (give title Other (specify below) below)						
(Street) GREENSBORO NC 27455				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)  Form filed by One Reporting Person  Form filed by More than One Reporting Person									
(City)	(Sta	ate)	(Zip)												. 0.00				
		Table	e I - No	n-Deriva	tive S	Secui	rities	Acq	uired	, Dis	posed of	, or E	Benefi	icially	Own	ed			
Date			2. Transact Date (Month/Day	Execution Date,		3. Transaction Code (Instr. 8)  4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and Securiti Benefic		ties cially I Following	Form (D) o	n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership					
									Code	v	Amount	(A) o (D)	r Pric	e	Transa	ed action(s) 3 and 4)			(Instr. 4)
Capital St	tock			08/16/2	024 s 831 D \$.				\$5′	71.51	51 5,725			D					
		Ta	able II								osed of, convertib				Owne	d			
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	Execu ) if any	eemed 4. In Transa Code (th/Day/Year) 8)					6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price o Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownersh (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	eablo	Expiration Date	Title	Amour or Number of Shares	er					

**Explanation of Responses:** 

Andrea R. Lindell

08/26/2024

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).