## 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									

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 30(h) of the Investment Company Act of 1940

1. Name and		2. Issuer Name <b>and</b> Ticker or Trading Symbol CHEMED CORP CHE								Relationship of Reporting Person(s) to Issuer (Check all applicable)									
<u>HUTTO</u> 	N THOM	<u>IAS C</u>		CHEMED CORP [ CHE ]								X Director			10% Owner				
(Last) 1270 AVE SUITE 19	(Firs ENUE OF T		3. Date of Earliest Transaction (Month/Day/Year) 02/17/2012								Officer (give title Other (specify below)  vice president				specify				
(Street)							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)				
NEW YORK NY 10020															Form filed by One Reporting Person  Form filed by More than One Reporting				
(City) (State) (Zip)					-									Person					
		Tab	le I - No	n-Deriv	vative	Sec	urities	s Acq	uired,	Disp	osed of,	or Ben	eficially	Owned					
1. Title of Security (Instr. 3)				2. Trans Date (Month/	action Day/Yea	r) E	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			nd 5) Securities Beneficially Owned Followi		Form	Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
capital stoo	ck			02/17/2012					M		3,000	A	\$33.75	33,682		D			
capital stock 02									M		2,000	A	\$38.13	35,	682	D			
capital stoo	ck			02/17	7/2012				F <sup>(1)</sup>		3,598	D	\$63.36	32,084		D			
capital stoo	02/17	7/2012				A <sup>(2)</sup>		710	A	\$63.36	32,	794		D					
capital stock														3,026			1 1	by spouse	
capital stock														6,0	)58		I	by son	
capital stock													6,070				by daughter		
capital stock														5,900			I	by son	
		Т	able II -								sed of, or			Owned					
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution urity or Exercise (Month/Day/Year) if any		ned n Date,	4. Transa Code (1 8)	ction	5. Number of Derivative		6. Date Exerc Expiration Da (Month/Day/		isable and ite	7. Title a Amount Securitie Underlyi Derivativ Security and 4)	nd of es ng	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti	e Coss Fally Coss (1)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A) (D)		Date Exercisable		Expiration Date	Title	Amount or Number of Shares		(Instr. 4)	ion(s)			
stock option(right to buy with tandem tax withholding)	\$33.75	02/17/2012			M			3,000	11/19/2008		05/19/2018	capital stock	3,000	\$33.75	50,00	00	D		
stock option(right to buy with tandem tax withholding)	\$38.13	02/17/2012			М			2,000	09/11/2005		03/11/2015	capital stock	2,000	\$38.13	\$38.13 48,00		D		
stock option(right to buy with	\$63.36	02/17/2012			A		7,500		02/17/2	2013 <sup>(3)</sup>	02/17/2022	capital	7,500	\$63.36	55,50	00	D		

## **Explanation of Responses:**

1. Payment of purchase price and tax obligation on stock option exercise.

2. award of restricted stock vesting in full 02/17/2016.

3. exercisable in 3 equal annual installments commencing 2/17/2013.

## Remarks:

tandem tax withholding)

Thomas C. Hutton

capital stock

02/21/2012

\*\* 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.