**CHEMED CORP** Form 4

February 24, 2014

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

**OMB** Number:

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Check this box if no longer subject to Section 16. Form 4 or

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Form 5 Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue. 30(h) of the Investment Company Act of 1940 See Instruction

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading OTOOLE TIMOTHY S Issuer Symbol CHEMED CORP [CHE] (Check all applicable) (First) (Middle) (Last) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner X\_ Officer (give title \_Other (specify 2600 CHEMED CENTER, 255 02/21/2014 below) **EAST 5TH STREET** executive vice president (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

#### CINCINNATI, OH 45202

(Ctata)

(7:-

(City)

wnership 7. Nature of	
i: Direct Indirect	
or Indirect Beneficial	
Ownership	
r. 4) (Instr. 4)	
ן	n: Direct Indirect or Indirect Beneficial Ownership

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

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

Person

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

### Edgar Filing: CHEMED CORP - Form 4

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if Transaction Derivative Expiration Date Amount Code Securities (Month/Day/Year) Underlar) (Instr. 8) Acquired Securit		ivative Expiration Date ties (Month/Day/Year) red sed of 3, 4,		7. Title ar Amount of Underlyin Securities (Instr. 3 a	of ng s	8. Pri Deriv Secut (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
performance stock units	<u>(1)</u>	02/21/2014	A	1,206	(2)	(2)	capital stock	1,206	\$
performance stock units	<u>(1)</u>	02/21/2014	A	887	(3)	(3)	capital stock	887	\$

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

OTOOLE TIMOTHY S 2600 CHEMED CENTER 255 EAST 5TH STREET CINCINNATI, OH 45202

executive vice president

### **Signatures**

Timothy S. 02/24/2014

\*\*Signature of Date
Reporting Person

# **Explanation of Responses:**

- \* 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).
- (1) each performance stock unit represents a contingent right to receive one share of Chemed capital stock
- The restricted stock units vest based on the extent to which the Company achieves certain Earnings per Share performance targets over a performance period of January 1, 2014 through December 31, 2016, with the determination of such performance level to be made no later than March 15, 2017 and earned shares of Capital Stock to be delivered thereafter.
- The restricted stock units vest based on the extent to which the Company achieves certain Total Shareholder Return performance targets over a performance period of January 1, 2014 through December 31, 2016, with the determination of such performance level to be made no later than March 15, 2017 and earned shares of Capital Stock to be delivered thereafter

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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