FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	Estimated average burden								
hours per respons	e: 0.5								

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* GEMUNDER JOEL F						2. Issuer Name and Ticker or Trading Symbol CHEMED CORP [CHE]									c all applicable) Director		ng Person(s) to Issue		wner
	(Fir	NTER	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/17/2021									Office	er (give title		Other (below)	specify
(Street)		H 4	5202		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year) 6 L									Form Form	al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson			
(City)	(30		Zip)	n Derivs	tivo 9	Secui	ritios	Λ.α.	uirad	Die	nosed of	or P	enefic	ially	Own				
Date				2. Transact	ion 2A. Deemed Execution Date,			ate,	3. Transa Code (8)	ction	4. Securities Disposed O 5)	s Acqui	red (A) oi	or 5. Amo 4 and Securi Benefi		ount of ties cially I Following)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
										v	Amount	(A) o (D)	r Price		Transa	ction(s) 3 and 4)			(1115411 4)
capital sto	ock			05/17/2	.021				A ⁽¹⁾		270	A	\$482	2.66	2:	2,505 D			
capital sto	ock														6,952 I by trust				
		Tal	ole II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	rivative Conversion Date Execution Date, Tracuity or Exercise (Month/Day/Year) if any Co				Transa Code (of Deriv	r osed) r. 3, 4	6. Date Expira (Month	tion D		Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sec (Ins	Price of ivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code		(A)	(D)	Date Exerci	or Num Date Expiration of		Number							

Explanation of Responses:

1. Award of stock

Remarks:

Joel F. Gemunder

05/18/2021

** 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.