Edgar Filing: CHASE CORP - Form 4

CHASE CORF	D							
Form 4 November 10,	2015							
FORM	Л					OMB A	PPROVAL	
	• UNITED ST		TIES AND EXCH ington, D.C. 2054		OMMISSION	OMB Number:	3235-0287	
Check this I if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct 1(b).	ERSHIP OF Act of 1934, 1935 or Section)	Expires:January 3200Estimated averageburden hours perresponse0						
(Print or Type Res	sponses)							
1. Name and Add CHASE PETH	lress of Reporting Per ER R	Symbol	Name and Ticker or Tr CORP [CCF]		5. Relationship of Issuer			
(Last)	(First) (Mid	Idle) 3. Date of E	Earliest Transaction		(Check	all applicable	e)	
26 SUMMER	STREET	(Month/Day 11/09/201			_X_ Director _X_ 10% Owner _X_ Officer (give title Other (specify below) Executive Chairman			
	(Street)	4. If Amend Filed(Month	lment, Date Original /Day/Year)	 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 				
	FER, MA 02324				Person			
(City)	(State) (Zi	(ip) Table	I - Non-Derivative See	curities Acqu	ired, Disposed of,	or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Transaction(A) or Dis Code (Instr. 3, 4 (Instr. 8)	(A) or	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Chase Corporation Common Stock			Code V Amount	(D) Price	767,853	D		
Chase Corporation Common Stock					73,980 <u>(1)</u>	Ι	Peter R. Chase 2013 Annuity Trust	
Chase Corporation Common					49,578 <u>(3)</u>	I	Peter R. Chase 2014	

Stock							Annuity Trust
Chase Corporation Common Stock	11/09/2015	S	500 <u>(4)</u> D	\$ 43.95	171,882 <u>(2)</u>	I	Peter R. Chase Insurance Trust
Chase Corporation Common Stock	11/10/2015	S	250 (4) D	\$ 43.84	171,632 <u>(2)</u>	I	Peter R. Chase Insurance Trust

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

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 control number.

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 Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
CHASE PETER R 26 SUMMER STREET BRIDGEWATER, MA 02324	Х	Х	Executive Chairman					
Signatures								
Paula Myers by power of attorney	1	1/10/2015						
**Signature of Reporting Person		Date						

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) Represents shares held by the Peter R. Chase 2013 qualified Annuity Trust, a grantor retained annuity trust.
- (2) Represents shares held by the Peter R. Chase Insurance Trust.
- (3) Reflects shares held by the Peter R. Chase 2014 qualified Annuity Trust, a grantor retained annuity trust.
- (4) Reflects shares sold pursuant to a trading plan that was adopted on July 20, 2015 complying with rule 10b5-1 under the Securities Act of 1934, as amended.

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.