**CHASE CORP** Form 4 April 26, 2017

### FORM 4

#### **OMB APPROVAL**

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

OMB 3235-0287 Number:

January 31,

Check this box if no longer subject to Section 16.

Expires: STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

2005 Estimated average burden hours per response... 0.5

5. Relationship of Reporting Person(s) to

Issuer

Form 4 or Form 5 obligations

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

**SECURITIES** 

30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading

Symbol

1(b).

(Print or Type Responses)

CHASE PETER R

Chase

Corporation

04/25/2017

1. Name and Address of Reporting Person \*

may continue.

See Instruction

			CHASE CORP [CCF]			(Check all applicable)			
(Last) (First) (Middle) 295 UNIVERSITY AVE.			3. Date of Earliest Transaction (Month/Day/Year) 04/25/2017			_X DirectorX 10% OwnerX Officer (give title Other (specify below) Executive Chairman			
(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)  WESTWOOD, MA 02090					6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(State) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned								
1.Title of Security (Instr. 3)  Chase Corporation Common	2. Transaction (Month/Day/	any	eemed tion Date, if ch/Day/Year)	3. 4. Securities Transaction(A) or Disport Code (Instr. 3, 4 and (Instr. 8)  (A)  Code V Amount (D)	sed of (D) and 5)	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						258,451 (2)	I	Peter R. Chase 2016 Qualified Annuity Trust #2	

S

500 (4) D

\$

100.7

236,560 (1)

Ι

Peter R.

Chase

Common (3) Insurance Stock 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.

SEC 1474

(9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. onNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	7. Title Amour Underly Securit (Instr. 3	nt of ying	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 1	Amount or Number of Shares		

# **Reporting Owners**

Reporting Owner Name / Address	Keiauonsnips						
	Director	10% Owner	Officer	Other			
CHASE PETER R 295 UNIVERSITY AVE. WESTWOOD, MA 02090	X	X	Executive Chairman				

### **Signatures**

Paula Myers by power of attorney 04/26/2017

\*\*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 Insurance Trust.
- (2) Reflects shares held by the Peter R. Chase 2016 Qualified Annuity Trust #2
- (3) All of the shares sold for this transaction were sold at \$100.70 per share.

**(4)** 

Reporting Owners 2

#### Edgar Filing: CHASE CORP - Form 4

Represents shares sold pursuant to a trading plan that was adopted on November 4, 2016 complying with Rule 10b5-1 under the Securities Exchange 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.