SEC Form 5

FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3 Holdings Reported.

1(c). See Instruction 10

Form 4 Transactions Reported.

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equily securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

> Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL									
OMB Number:	3235-0362								
Estimated average	burden								
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1. Name and Address of Reporting Person* Galtman Michael D (Last) (First) (Middle) 500 ENERGY LANE			CHESAPE	AKE UT	Trading Symbol ILITIES CORP [CPK al Year Ended (Month/Day/Year)	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Senior VP & CAO				
(Street) DOVER (City)	DE (State)	19901 (Zip)	4. If Amendmer	t, Date of Orig	inal Filed (Month/Day/Year)	6. Indir Line) X	vidual or Joint/Grc Form filed by C Form filed by M Person	one Reporting I	Person	
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned										
		2A. Deemed Execution Date,	3. Transaction	4. Securities Acquired (A) or Disp Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities	6. Ownership	7. Nature of Indirect		

	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.				Securities Beneficially Owned at end of	Ownership Form: Direct (D) or	Indirect Beneficial Ownership
			5)	Amount	(A) or (D)	Price	Issuer's Fiscal	Indirect (I) (Instr. 4)	(Instr. 4)
Common Stock							823(1)	D	
Common Stock							160(2)	Ι	401k Plan

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

	(eigi, pare, care, marante, epiterio, contention occarities)													
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. Transaction Code (Instr. 8)	of		Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Includes 10 shares for the reporting person that were acquired since last filing through reinvestment of dividends under Chesapeake Utilities Corporation's Dividend Reinvestment and Direct Stock Purchase Plan.

2. Includes 40 shares of common stock that the reporting person acquired under the 401k Plan via an employer supplemental contribution that was funded in shares of Chesapeake Utilities Corporation common stock in July 2023. Dividends payable on 401k Plan shares were reinvested to purchase 2 additional shares of Chesapeake Utilities Corporation common stock since last filing.

Beth W. Cooper, by Power of 02/13/2024

Attorney

** 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.