SEC Form 4

Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Markington D.O. 00540

Washington, D.C. 20549

OMB APPROVAL

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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

1. Name and Address of Reporting Person* Webber Kevin J (Last) (First) (Middle) 500 ENERGY LANE			2. Issuer Name and Ticker or Trading Symbol <u>CHESAPEAKE UTILITIES CORP</u> [CPK] 3. Date of Earliest Transaction (Month/Day/Year) 02/20/2024	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Senior VP & Chief Dev. Officer					
SUD ENERGY LANE (Street) DOVER DE 19901		19901	4. If Amendment, Date of Original Filed (Month/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 Person					
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication						

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(
Common Stock	02/20/2024		A		2,462 ⁽¹⁾	Α	\$105.02	10,083 ⁽²⁾⁽³⁾	D	
Common Stock								445 ⁽⁴⁾	Ι	401k Plan

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

	(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. Transa Code (8)		of Deriv Secu Acqu (A) or Dispo of (D)	rative rities ired r osed	6. Date Exerci Expiration Da (Month/Day/Yo	te	7. Title Amou Secur Under Deriva Secur 3 and	nt of ities lying ative ity (Instr.	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)
											Amount				

Date

Exercisable

Expiration Date

Explanation of Responses:

1. A portion of these shares will be withheld to account for the payment of the tax liability associated with the issuance of the shares. Such tax liability has not been determined. The tax liability, when determined, will be reflected on an amendment to this Form 4 or a subsequently filed Form 4.

(D)

(A)

2. Includes 20 shares that were acquired for the reporting person since last filing through reinvestment of dividends under Chesapeake Utilities Corporation's Dividend Reinvestment and Direct Stock Purchase Plan.

3. Includes 4,047 deferred stock units of which 23 were acquired by the reporting person since the last filing through reinvestment of dividends. Deferred stock units will be settled on a one-for-one basis in common stock.

4. Dividends payable on 401k Plan shares were reinvested to purchase 2 additional shares of Chesapeake Utilities Corporation common stock since last filing.

Code V

Beth W. Cooper, by Power of	02/22/2024
Attorney	02/22/2024

Number

Shares

Title

** 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.