FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

	OMB APP	OMB APPROVAL						
FICIAL OWNERSHIP	OMB Number:	3235-0287						
I IOIAL OWNLINGTIII	Estimated average burden							

hours per response:

0.5

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

## 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*  McCauley Tim						2. Issuer Name and Ticker or Trading Symbol Chefs' Warehouse, Inc. [ CHEF ]										k all app Direc	ctor er (give title		rson(s) to Is 10% O Other (	vner	
(Last) 100 EAS	(I T RIDGE	First)	<i>(</i> 1)	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 02/27/2024									Λ		below)  Chief Accounting		below) g Officer		
(Street)	TIELD (	CT	0	6877		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	-/					
(City)	(	State)	(Z	ľip)		Rule 10b5-1(c) Transaction Indication															
	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																				
			Table	I - No	n-Deriva	tive S	Secui	rities	s Acq	uired,	Dis	posed of	, or Be	enefic	cially	/ Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)						Exec if any	Deemed ecution Date, ny onth/Day/Year)		3. Transaction Code (Instr. 8)  4. Securitie Disposed (5) 5)				4 and Securit Benefic Owned		ies cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
										Code	v	Amount	(A) or (D)	Pric	е	Transa	Reported Transaction(s) (Instr. 3 and 4)			(11150. 4)	
Common Stock 02/27/					02/27/2	2024				A		7,733	A	(	(1) 6.		63,351		D		
Common Stock 02/27/2					2024				F <sup>(2)</sup>		4,968	D	\$3′	\$37.78		58,383		D			
Common Stock 02/28/2						2024				F <sup>(3)</sup>		530	D	\$3′	37.35		57,853		D		
			Tat									osed of, convertib				Owne	d				
1. Title of Derivative Security (Instr. 3)	ative Conversion Date, rity or Exercise (Month/Day/Year) Execution Date, if any			4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
						Code	v	(A)	(D)	Date Exercis	able	Expiration Date		Amoun or Number of Shares							

## **Explanation of Responses:**

- 1. Shares acquired upon the certification of performance conditions applicable to performance-based restricted common stock awarded to the reporting person pursuant to The Chefs' Warehouse, Inc. Amended and Restated 2019 Omnibus Equity Incentive Plan (the "Plan").
- 2. Shares withheld upon the vesting of performance-based restricted common stock awarded to the reporting person pursuant to the Plan.
- 3. Shares withheld upon the vesting of restricted common stock awarded to the reporting persons pursuant to the Plan.

/s/ Alexandros Aldous,

Attorney-in-Fact for Tim

02/29/2024

<u>McCauley</u>

\*\* 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.