SEC Form 4	
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# FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL										
OMB Number:	3235-0287									
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1. Name and Address of Reporting Person* Aldous Alexandros			2. Issuer Name <b>and</b> Ticker or Trading Symbol Chefs' Warehouse, Inc. [ CHEF ]		ationship of Reporting Pe < all applicable) Director Officer (give title	rson(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) 100 EAST RIDGE ROAD		(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 04/06/2015	X	below) General Co	below)		
(Street) RIDGEFIELD (City)	,		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				

### 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)			4. Securities A Disposed Of (1 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150.4)
Common Stock	04/06/2015		Α		45 <b>,</b> 106 <sup>(1)</sup>	Α	\$0.00	73,375	D	
Common Stock	04/06/2015		Α		22,553 <sup>(2)</sup>	Α	\$0.00	95,928	D	

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. Transa Code ( 8)		of Deriv Secur Acqu (A) or Dispo of (D)	f Expiration Date (Month/Day/Year) cquired A) or isposed f (D) nstr. 3, 4		Expiration Date Amount of (Month/Day/Year) Securities			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)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

#### Explanation of Responses:

1. In recognition of this reporting person's long and exemplary service to the Company, this reporting person received 45,106 shares of restricted common stock pursuant to The Chefs' Warehouse, Inc. 2011 Omnibus Equity Incentive Plan. The forfeiture restrictions associated with this award will lapse in one-fourth increments as of the first through fourth anniversary dates of the grant date.

2. In recognition of this reporting person's efforts in connection with the Company's acquisition of Del Monte Capitol Meat Co. and certain related entities, this reporting person received 22,553 shares of common stock pursuant to The Chefs' Warehouse, Inc. 2011 Omnibus Equity Incentive Plan. One-half of the shares will be subject to transfer restrictions until the second anniversary of the grant date and the remaining one-half of the shares will be subject to transfer restrictions until the fourth anniversary of the grant date.

### **Remarks:**

/s/ Alexandros Aldous

\*\* Signature of Reporting Person

04/08/2015

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.