FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | | | |
| 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).

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

| Name and Address of Reporting Person* Pappas Christopher | | | | 2. Issuer Name and Ticker or Trading Symbol Chefs' Warehouse, Inc. [CHEF] | | | | | | | | | ck all app | licable) | rting Person(s) to Issuer | | | | |
|--|---|--|--|---|--|--|--|---|---|------------|-------------------------------|--|--|---|---|--|--------------|---|--|
| (Last) (First) (Middle) 100 EAST RIDGE ROAD | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/09/2021 | | | | | | | | X | Office below | , | Other (specify below) | | | |
| (Street) RIDGEFIELD CT 06877 (City) (State) (Zip) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Ind Line) | Form | al or Joint/Group Filing (Check Applicable orm filed by One Reporting Person orm filed by More than One Reporting erson | | | | | |
| Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | Execution Date, | | 3. 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 8) | | | 4 and Securiti | | ties cially I Following | Form: | Direct Indirect str. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | Code | v | Amount | (A) (D) | or P | rice | Transa | ction(s) 3 and 4) | | | (1113111. 4) | | |
| Common Stock 11/09/20 | | | | | 021 | | | | S | | 300,000 | I |) \$ | 35.32 | 2,6 | 610,826 | | 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 | Exercise (Month/Day/Year) if any (Month/Day/Year) rivative | | | saction of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4) Amou or Numb of Share | | Str. De Se (In | Price of erivative ecurity estr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4) | | .0. Ownership Form: Direct (D) Or Indirect I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

/s/ Alexandros Aldous, 11/12/2021 Attorney-in-Fact for Christopher Pappas

** 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.