SEC Form 3 FORM 3

UNITED STATES SECURITIES AND EXCHANGE

COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL

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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 [*] HERBST FREDERICK C	Requiring S (Month/Day	2. Date of Event Requiring Statement (Month/Day/Year) 12/07/2021 3. Issuer Name and Ticker or Trading Symbol Chicago Atlantic Real Estate Finance, Inc. [REFI]						EFI]	
(Last) (First) (Middle) CHICAGO ATLANTIC REAL ESTATE FINANCE INC 420 N WABASH AVE, STE 500 (Street) CHICAGO IL 60611 (City) (State) (Zip)	-		4. Relationship of Repor Issuer (Check all applicable) X Director Officer (give title below)	10%	Owner (specify	File 6. II	d (Month/Day/ ndividual or Jo eck Applicable Form filed Person	int/Group Filing e Line) by One Reporting by More than One	
Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)			2. Amount of Securities Beneficially Owned (Inst 4)	r. Form: (D) or			4. Nature of Indirect Beneficial Ownership (Instr. 5)		
Common Stock			0		D				
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									
1. Title of Derivative Security (Instr. 4) Expiration Date (Month/Day/Year)		ate	Underlying Derivative Security (Instr. 4)			sion cise	Form:	6. Nature of Indirect Beneficial Ownership (Instr.	
	Date Exercisable	Expiration Amount Deriv or Secu Number of		Securit	tive or Indirect		5)		

Explanation of Responses:

/s/ Frederick C. Herbst

** Signature of Reporting

Person 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 5 (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.

12/07/2021

Date