FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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	OMB APP	PROVAL
١Ē,	OMB Number	3235-02

87 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

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1. Name and Address of Reporting Person* <u>LASKAWY PHILIP A</u>					2. Issuer Name <b>and</b> Ticker or Trading Symbol HENRY SCHEIN INC [ HSIC ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
													X Director	r	10% Owner		ner		
(Last) C/O HENR	(First	,	iddle)	3. Date of Earliest Transaction (Month/Day/Year) 03/31/2014									Officer (give title Other (spe below) below)						
135 DURYEA ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)  MELVILLE	E NY	11	747											X Form f	led by Mo		rting Person One Report	I	
(City)	(State	e) (Zi	p)											Persor	l				
		Table	e I - Non-D	Deriva	tive	Secu	urities	Acq	uired,	Disp	osed of	, or Ben	eficial	y Owned					
			Da	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Dispose Code (Instr. 5)		Disposed	ities Acquired (A) o d Of (D) (Instr. 3, 4 a		Beneficia Owned F	s Illy ollowing	Form:	Direct I Indirect E str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	on(s)		1	(Instr. 4)	
Common Stock, par value \$0.01 per share														17,	543		D		
Common Stock, par value \$0.01 per share												4,000			1 1.	By Spouse			
		Та	ble II - De (e.								sed of, onvertib			Owned					
Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		3A. Deemed Execution Da if any (Month/Day/	ate,	4. Transactic Code (Inst		ion of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivativi Securitie Beneficia Owned Following Reported Transact (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Deferred Compensation Plan Phantom Stock	(1)	03/31/2014			A		178 <sup>(2)</sup>		(3)		(3)	Common Stock, par value \$0.01 per	178	\$0.00	13,984	1 <sup>(4)</sup>	D		

### **Explanation of Responses:**

- 1. Each share of phantom stock is the economic equivalent of one share of the Issuer's common stock.
- 2. Represents the number of shares of phantom stock credited to the reporting person's phantom stock account pursuant to the Issuer's Non-Employee Director Deferred Compensation Plan (the "Plan") representing an exempt transaction under the Plan. The number of shares of phantom stock credited to the reporting person's phantom stock account is determined by dividing the amount of deferred eligible director fees by the closing price of a share of Issuer common stock on the award date.
- 3. The balance in the reporting person's phantom stock account is distributed to the reporting person in Issuer common stock following the termination of the reporting person's directorship, the reporting person's death or disability or a change of control of the Issuer.
- 4. Represents the aggregate number of shares of phantom stock allocated to the reporting person under the Plan as of the award date based on the closing price of a share of the Issuer's common stock on the award

# Remarks:

/s/ Jennifer Ferrero (as Attorney-in-Fact for Philip A 04/02/2014 Laskawy)

\*\* 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.