FORM 4

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

Washington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235		

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

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								
Estimated average burden								
hours per response	: 0.5							

1. Name and Address of Reporting Person*  Margulies Anne H.					2. Issuer Name and Ticker or Trading Symbol HENRY SCHEIN INC [ HSIC ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director 10% Owner						
(Last)	(Fir	est) (M	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024						^		er (give title		Other (s				
C/O HENRY SCHEIN, INC. 135 DURYEA ROAD			4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	6. Individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person							
(Street) MELVII	LLE NY	<i>?</i> 1	1747												Form Perso	filed by Mo	re than	One Repo	orting
(City)	(St	ate) (Z	Zip)		Rule 10b5-1(c) Transaction Indicatio  Check this box to indicate that a transaction was made purs satisfy the affirmative defense conditions of Rule 10b5-1(c).					suant t									
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transact Date (Month/Date)				Execution Date,						s Acquired (A) or f (D) (Instr. 3, 4 and			5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
								Code	v	Amount	(A) (D)	or P	rice	Transa	action(s) 3 and 4)			(Instr. 4)	
Common Stock, par value \$0.01 per share 0.			03/01/2	2024				F		495(1)	D	\$	<b>5</b> 76.88	17,680			D		
Common Stock, par value \$0.01 per share 03/04			03/04/2	2024			A		2,604(2)		. ;	\$0.00	20,284			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)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Disport of (D	osed ) r. 3, 4	Expiration D (Month/Day/stred sed 3, 4		te	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (Ir	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y [0]	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code		(A)	(D)	Date Exercis	able	Expiration Date	Amount or Number of Shares		ber					

## Explanation of Responses:

- 1. Represents the surrender of shares to the Issuer to satisfy the reporting person's tax withholding obligation upon the vesting of the reporting person's March 1, 2023 grant of time-based restricted
- 2. Acquired pursuant to the Issuer's 2023 Non-Employee Director Stock Incentive Plan. Subject to certain exceptions, such restricted stock/units will vest subject to (i) the passage of a specified period of time and (i) the reporting person's continued performance of services for the Issuer.

/s/ Jennifer Ferrero (as attorney-in-fact for Anne H. Margulies)

\*\* Signature of Reporting Person

03/05/2024

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.