FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

l	OMB APPRO	VAL				
	OMB Number:	3235-0287				
l	Estimated average burd	en				
l	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

1. Name and Address of Reporting Person* KOMAROFF STANLEY							2. Issuer Name and Ticker or Trading Symbol HENRY SCHEIN INC [HSIC]									app Direc	licable)		Issuer Owner r (specify			
	(Last) (First) (Middle) C/O HENRY SCHEIN, INC. 135 DURYEA ROAD							3. Date of Earliest Transaction (Month/Day/Year) 03/01/2013								X Officer (give title Other (specify below) Senior Advisor						
(Street) MELVIL (City)	LE N	_ 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person										
		Tab	le I - No	n-Deriv	vative	Sec	curitie	s Ac	quired	, Dis	posed o	f, or	r Ben	efici	ally O	vne	d					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)						Execution Date,		3. Transa Code (8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				4 and 5) Secu Bene		cially Following	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	Trans		ction(s) 3 and 4)		(1130.4)				
Common	Stock, par	value \$0.01 per	share	03/01	/2013				A		10,130	(1)	A	\$88	3.84	7	8,998	D				
Common	Stock, par	value \$0.01 per	share												392 I By 401(k) plan							
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. Deen Executio if any (Month/D	n Date,	Code (Ins		of Deriv Secu Acqu (A) of Dispo	r osed) r. 3, 4	6. Date E Expiration (Month/I	on Dat		7. Title and Amount of Securities Underlying Derivative Security (Instr and 4)		nstr. 3	Derivat Securit	3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)			
	Code V		v	(A)	(D)			Expiration Date	Title	or Nu of	nount mber ares											

Explanation of Responses:

1. Grant of restricted stock units (RSUs) pursuant to the Issuer's 1994 Stock Incentive Plan, as amended. 65% will vest subject to (x) Issuer's achievement of a specified performance goal and (y) reporting person's continued performance of services for the Issuer. 35% will vest subject to (x) passage of a specified period of time and (y) reporting person's continued performance of services for the Issuer. With respect to the performance-based RSUs, if the continued service requirement is satisfied and achievement of the performance goal (x) exceeds 100% of target, the Issuer may issue additional vested shares of common stock in an amount that corresponds to the incremental percentage of the performance goal achieved in excess of 100% of target or (y) is less than 100% of target, the reporting person will surrender to the Issuer shares of common stock in an amount that corresponds to the incremental percentage of the performance goal achieved that is below 100% of target (i.e., shortfall).

Remarks:

<u>/s/ Stanley Komaroff</u> <u>03/04/2013</u>

** 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.