FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

UIVID APP	ROVAL							
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

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1. Name and Address of Reporting Person*  Rekow E Dianne				2. Issuer Name <b>and</b> Ticker or Trading Symbol HENRY SCHEIN INC [ HSIC ]								(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
											)	Directo	r		10% O\	vner			
(Last) (First) (Middle) C/O HENRY SCHEIN, INC.					3. Date of Earliest Transaction (Month/Day/Year) 06/30/2014									Officer below)	(give title		Other (s below)	specify	
135 DURYEA ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. In	6. Individual or Joint/Group Filing (Check Applicable					
(Street)													Line						
MELVILLE NY 11747													X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City)	(State	e) (Zi	p)																
		Table	l - Non-	-Deriv	ative	Seci	ırities	Acq	uired,	Dis	posed of	, or Ben	eficially	/ Owned					
Date					action 2A. Deemed Execution Date, if any (Month/Day/Year)		Date,	Transaction Dispose Code (Instr. 5)		Disposed	ties Acquired (A) or d Of (D) (Instr. 3, 4 au		5. Amour Securitie Beneficia Owned F	es For ally (D) collowing (I) (		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	tion(s)			(Instr. 4)	
Common Stock, par value \$0.01 per share												1,770			D				
		Та	ble II - D (e								osed of, onvertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title an Amount o Securities Underlyin Derivative (Instr. 3 ar	f g Security	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares						
Deferred Compensation Plan Phantom Stock	(1)	06/30/2014			A		56 <sup>(2)</sup>		(3)		(3)	Common Stock, par value \$0.01 per share	56	\$0.00	56 <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 date.

## Remarks:

/s/ Jennifer Ferrero (as
Attorney-in-Fact for E. Dianne 07/02/2014
Rekow)

\*\* 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.