FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
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STATEMENT	OF	CHANGES	IN BE	NEFICIAL	OWNERSI	HIP

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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* MLOTEK MARK E					2. Issuer Name and Ticker or Trading Symbol HENRY SCHEIN INC [HSIC]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
	(Fi NRY SCHE	IN, INC.	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 03/01/2019								X Officer (give title below) EVP, Chief			Other (specify below) trategic Officer)		
(Street) MELVIL (City)			11747 Zip)		- 4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								ine)	-,					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)				Execution Date,		Transaction Disposed Code (Instr. 5)		ties Acquired (A) or I Of (D) (Instr. 3, 4 ar				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	Tran		action(s) 3 and 4)			(11150.4)		
Common Stock, par value \$0.01 per share 03/01.				/2019	2019		F		3,385(1)		D	\$60	60.07 9),135(2)	Г				
Common Stock, par value \$0.01 per share														4,093		I		by 401(k) plan		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
			Transa Code (ion of		6. Date Exercisable and Expiration Date (Month/Day/Year)		е	Amount of Securities Underlying Derivative Security (Instr. and 4)			Deriva Securi	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	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	of	mber ares						

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 3, 2015 grant of time-based restricted stock/units. (Actual vesting date of March 3, 2019 was a non-business day so vesting occurred on the preceding business day.)
- 2. The number of restricted stock/units included in Column 5 of Table 1 was adjusted in connection with the spin-off and subsequent merger of the Issuer's animal health business on February 7, 2019 (the "Spin-Off"). The adjustment reflects the product of (i) the number of restricted stock/unit awards immediately prior to the Spin-Off and (ii) a ratio equal to a fraction, with the numerator equal to the average of the high and low pre-Spin-Off trading prices of the Issuer's common stock on February 6, 2019 (the "Issuer Pre-Spin-Off Price") and the denominator equal to the difference between (A) the Issuer Pre-Spin-Off Price and (B) the product of (x) 0.4 and (y) the average of the high and low trading prices of the common stock of Covetrus, Inc. (the combined company resulting from the Spin-Off) on February 8, 2019, the trading day immediately following the distribution date of the Spin-Off.

Remarks:

/s/ Jennifer Ferrero (as 03/05/2019 Attorney-in-Fact for Mark E. Mlotek)

** 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.