FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	PROVAL
OMB Number:	3235-028

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(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

					01 \	JCCIII	011 30(11)	or tile i	TIVESTITE	iii Co	inparty Act	01 13	/+ 0								
1. Name and Address of Reporting Person* PALADINO STEVEN					2. Issuer Name and Ticker or Trading Symbol HENRY SCHEIN INC HSIC									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
PALADINO STEVEN										_	-				X	Direc	ctor		10% C)wner	
(Last)	(Fi	rst)	(Middle)		3. Date of Earliest Transaction (Month/Day/Year)									X	Offic belov	,	Other (specify below)				
C/O HENRY SCHEIN, INC.					03/	03/09/2012										EVP,)		
135 DURYEA ROAD																					
(Street)					- 4. If	Ame	endment	, Date o	of Origina	l Filed	d (Month/Da	ay/Ye	ear)		6. Indiv Line)	idual c	r Joint/Group	Filing	(Check A	pplicable	
MELVIL	LE N	Y :	11747												X	Forn	n filed by One	iled by One Reporting Person			
															Form filed by More than One Reporting Person						
(City)	(St	ate)	(Zip)																		
		Tab	le I - No	n-Deriv	ative	Se	curitie	s Acc	quired,	, Dis	posed o	f, o	r Ber	nefic	ially (Owne	ed				
Date					Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4					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) or (D)	Pric	e	Trans	action(s) 3 and 4)			(Instr. 4)	
Common Stock, par value \$0.01 per share 03/09/2					/2012	012			A		12,911 ⁽¹⁾		A	\$(0.00		94,141		D		
Common	Common Stock, par value \$0.01 per share 03/09				2012				F		11,165		D	\$7	3.93	82,976			D		
Common Stock, par value \$0.01 per share																	3,358		I	By 401(k) plan	
		Ta									sed of, onvertib					vned					
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)		n of		6. Date Exercis Expiration Dat (Month/Day/Ye		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		;		ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)	Oi Fo Di (I)). wnership orm: rect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Titl	or Nu of	ımber							

Explanation of Responses:

- 1. Represents additional shares of the issuer's common stock issued under the Henry Schein, Inc. 1994 Stock Incentive Plan that vested on March 9, 2012 in connection with the issuer exceeding the performance target with respect to the reporting person's March 9, 2009 grant of performance-based restricted stock.
- 2. 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 9, 2009 grant of performance-based restricted

Remarks:

<u>/s/ Steven Paladino</u>

03/13/2012

** 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.