FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

9

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average	e burden								

0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10h5-

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

	ee Instruction																		
		f Reporting Person	*						er or Tr N IN(ationship k all app	of Reportin	ng Pei	rson(s) to Is	ssuer
BERG	MAN ST	ANLEY M				INIXI	SC.		IN IINC	<u>~</u> [isic j			1	Direc	,		10% O	wner
(Last)	/Fi	rst) (Middle)		3 Da	te of F	arlipet	Trane	action (Month	/Day/Year)			1	Office below	er (give title		Other (below)	specify
' '	IRY SCHE	,	ivildule)			6/202		iialis	action (IVIOTILIT	/Day/Teal)					Chairm	an, C	CEO	
	RYEA ROA																		
-					4. If A	Amend	ment,	Date o	of Origina	al File	d (Month/Da	y/Year)			vidual o	Joint/Grou	p Filin	ıg (Check A	pplicable
(Street) MELVII	TE N	V 1	11747											Line)	Form	filed by On	e Rep	ortina Pers	on
MELVIL	LE N	Y	11747												Form	filed by Mo		•	
(City)	(S	tate) (Zip)												Perso	on			
		Table	l - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	Benef	cially	/ Own	ed			
			2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			4 and Secur Bene Owne		ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) (D)	Pri	се		ed ction(s) 3 and 4)			(Instr. 4)
Common	Stock par	value \$0.01 per	shre	09/16/2	2024				G		634	D	\$0	.00(1)	47	4,162			By Spouse ⁽²⁾
Common	Stock, par	value \$0.01 per	share												26	9,290		D	
Common	Stock, par	value \$0.01 per	share												9	,673		I	By 401(k) Plan ⁽³⁾
		Та	ble II -								osed of, convertib				Owne	d			
1. Title of Derivative Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	e Execution [Code (Ins				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		Dei See (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code		(A)	(D)	Date Exercise	ahla	Expiration	Title	Amou or Number of Shares	er					

Explanation of Responses:

- 1. Gift, not applicable.
- 2. Represents (i) 119,502 shares held by the Bergman Family 2010 Trust #2, of which Mrs. Bergman, Stanley M. Bergman's wife, is a co-trustee and a beneficiary; (ii) 1,392 shares held by Mrs.Bergman; (iii) 329,410 shares held by the Bergman Family 2010 Trust #2, LLC, of which Mrs. Bergman is a manager; and (iv) 23,858 shares held by the SBMB GST Trusts Partners LLC, of which Mrs. Bergman is a manager.
- 3. Reflects the reporting person's interest in equivalent shares of Henry Schein common stock held by the unitized stock fund in the Henry Schein, Inc. 401(k) Savings Plan (the "Plan"). The unitized stock fund consists of Henry Schein common stock and cash or cash equivalents. The number of shares attributed to the reporting person as a participant in the Plan and expressed as equivalent shares has been calculated based on the closing price of Henry Schein common stock on September 16, 2024.

/s/ Jennifer Ferrero (as attorney-in-fact for Stanley M. 09/18/2024 Bergman)

** 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.