FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL									
	OMB Number:	3235-0287								
	Estimated average burden									
-	hours nor resnance:	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* Rekow E Dianne					2. Issuer Name and Ticker or Trading Symbol HENRY SCHEIN INC [HSIC]								(Che	elationship ceck all applic	able)	Reporting Person(s) to Issuer alle)		
(Last) C/O HENR	(First	,	iddle)		3. Date of Earliest Transaction (Month/Day/Year) 09/30/2016									Officer (give title Other (below) below)				specify
135 DURY	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable								
(Street) MELVILLE NY 11747													X Form filed by One Reporting Person Form filed by More than One Reporting Person				- 1	
(City)	(State	e) (Zi	p)															
		Table	e I - Nor	n-Deriv	ative	Secu	ırities	Acq	uired,	Dis	osed of	, or Ben	eficially	y Owned				
1. Title of Security (Instr. 3) 2. Trans: Date (Month/I					action 2A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Transaction Disposed O Code (Instr. 5)					5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transacti (Instr. 3 a	action(s)			(Instr. 4)
Common St								4,1	4,190		D							
		Та									sed 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. Transactior Code (Instr. 8)		n of		6. Date Exercisable an Expiration Date (Month/Day/Year)			d 7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	Owners Form: Direct or Indii (I) (Inst	Ownership	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa	ıble	Expiration Date	Title	Amount or Number of Shares					
Deferred Compensation Plan Phantom Stock	(1)	09/30/2016			A		136 ⁽²⁾		(3)		(3)	Common Stock, par value \$0.01 per share	136	\$0.00	1,096	(4)	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 10/04/2016
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.