FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								
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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* BERGMAN STANLEY M						2. Issuer Name and Ticker or Trading Symbol SCHEIN HENRY INC [HSIC]										k all app	tionship of Reporti all applicable) Director		. ,	Issuer Owner	
	(Fi NRY SCHE LYEA ROA	IN, INC.	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 08/05/2005									X	Office below	,	title Other below and President		(specify)	
(Street) MELVIL (City)			11747 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Ind Line) X						
		Tab	le I - No	n-Deriv	ative	Se	curitie	s Acc	quired.	Dis	posed o	f, o	r Ben	efic	ially	Owne	ed				
1. Title of Security (Instr. 3)		2. Transa Date	Transaction		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			(A) o	or 5. Am Secur Bene Owne		unt of es ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount (A)		(A) or (D)	Pric	е	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common	Common Stock, par value \$0.01 per share 08/05/2				2005	.005			J ⁽¹⁾		64,363		A	\$0) ⁽¹⁾ 1,31		17,935			By Trustees ⁽²⁾	
Common	Stock, par	value \$0.01 per	share													11,111 D					
Common	Common Stock, par value \$0.01 per share															10),100			By Trustees ⁽³⁾	
Common Stock, par value \$0.01 per share									1,556			I	By Sons ⁽⁴⁾								
		Ta									sed of, onvertib					wned					
Derivative Conversion Date Executity Or Exercise (Month/Day/Year) if an			3A. Deen Executio if any (Month/D	n Date,	Date, Transaction		on of		6. Date Exercis Expiration Dat (Month/Day/Ye		e	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		nstr. 3	De Se	erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transactions (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of	ares							

Explanation of Responses:

- 1. Distribution of 64,363 shares of common stock of the issuer to the Stanley M. Bergman Continuing Trust dated September 14, 1994 following a liquidating distribution of shares of the Belair Capital Fund LLC held by the Stanley M. Bergman Continuing Trust dated September 14, 1994 had a non-controlling interest in the Belair Capital Fund LLC and no investment control over the fund's portfolio securities.
- 2. Represents shares held by Stanley M. Bergman's wife and Lawrence O. Sneag as co-trustees of the Stanley M. Bergman Continuing Trust dated September 14, 1994.
- 3. Represents shares held by Lawrence O. Sneag, Stanley M. Bergman's wife or his sons as trustees of trusts for the benefit of immediate family members of Stanley M. Bergman or certain other persons, wherein Stanley M. Bergman is the grantor. Of the 10,100 shares attributed to Mr. Bergman, he disclaims beneficial ownership with respect to 5,100 shares held in trust by his sons for the benefit of the Greenidge family except to the extent of his pecuniary interest.
- 4. Represents shares held directly by Stanley M. Bergman's sons.

Remarks:

/s/ Stanley M. Bergman

08/09/2005

** 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.