FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

<u> </u>									
OMB Number:	3235-0287								
Estimated average burden									
hours per response	: 0.5								

to Sect obligat	this box if no lo tion 16. Form 4 ions may contin tion 1(b).	or Form 5	STA		l pursua	ant to S	ection	16(a)	of the S	Securi	NEFICIA ties Exchang mpany Act o	e Act c		RSHIP	Estin		ber: 3 average burde esponse:	3235-0287 en 0.5	
1. Name and Address of Reporting Person* Knell Michael Gunnar (Last) (First) (Middle)					2. Issuer Name and Ticker or Trading Symbol <u>CHARLES RIVER LABORATORIES</u> <u>INTERNATIONAL, INC.</u> [CRL] 3. Date of Earliest Transaction (Month/Day/Year)									5. Relationship of Reporting Person(s) to Is (Check all applicable) Director 10% Or X Officer (give title Other (below) CSVP&Chief Accounting Offi				vner specify	
(Street)	WILMINGTON MA 01887						05/01/2021 4. If Amendment, Date of Original Filed (Month/Day/Year)								 5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person 				
		Table	I - No	on-Deriva	tive S	Secu	rities	Acc	uired	, Dis	posed of	, or E	Benefic	ially Ow	ned				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				/Year) Execut (Year) if any		eeemed ution Date, / th/Day/Year)				Disposed O	es Acquired (A) Of (D) (Instr. 3, 4		nd Secu Bene Own	nount of rities ficially ed Following	Forr (D) (m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) o (D)	^r Price	Tran	Reported Transaction(s) (Instr. 3 and 4)			(1150. 4)		
Common Stock 05/01/2					.021			F		93	D	\$332	.45	3,959		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
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)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year)		ate	7. Titl Amou Secur Under Deriv Secur 3 and	int of rities rlying ative rity (Instr.	8. Price o Derivativ Security (Instr. 5)		lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares							

Explanation of Responses:

/s/ Michael G. Knell

05/04/2021 ** 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.