FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

	OMB APPROVAL										
	OMB Number: 3235-02										
	Estimated average burden										
- 1	houre per recognes	. 0 =									

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* CHUBB STEPHEN D						2. Issuer Name and Ticker or Trading Symbol CHARLES RIVER LABORATORIES INTERNATIONAL, INC. [CRL]									ionship of Reporting all applicable) Director Officer (give title		g Person(s) to Iss 10% Ow Other (s		/ner		
(Last) 251 BAI	,	rst) (M LE STREET	Middle))		3. Date of Earliest Transaction (Month/Day/Year) 05/20/2020									below			below)	pecity		
(Street) WILMIN	IGTON M	A 0	1887		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indiv Line) X	,				on				
(City)	(St	ate) (2	Zip)													Perso)II				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
Date		2. Transaction Date Month/Day/Yea	ar) Ex	2A. Deemed Execution Date, if any (Month/Day/Year)		Tr	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				5. Amount of Securities Beneficially Owned Following		ties cially d ing	6. Own Form: I (D) or Indirect (Instr. 4	Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								C	Code V		Amount		A) or D)			Reported Transaction(s) (Instr. 3 and 4)					
Common	Stock			05/20/2020)				G	v	900		D	\$()	3	9,382	Γ			
Common	Stock			05/21/2020)				G	V	155		D	\$()	3	9,227	Г			
Common	Stock			08/17/2020				G	V	460		D	\$(\$0		38,767)			
Common	Stock			08/18/2020)				G	V	110		D	\$()	3	8,657	Γ)		
Common	Stock			08/18/2020)				S		700		D	\$217.2	514 ⁽¹⁾	3	7,957	Γ)		
Common	Stock			08/18/2020)			S		300		D	\$218.5	218.5833 ⁽²⁾		37,657)			
	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)	Derivative Conversion Date Security or Exercise (Month/Day/Year) if any					Transaction of Code (Instr. Derivati		ative rities ired osed	Exp	piratio	ercisable and		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		8. Price of Derivative Security (Instr. 5)			Ov Fo Dir or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	Code V (A) (D		(D)	Date Descripient		Expira	ation	Title	Amour or Numbe of Shares	er						

Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices ranging from \$216.865 to \$217.80 The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.
- 2. This transaction was executed in multiple trades at prices ranging from \$218.46 to \$218.82 The price reported above reflects the weighted average sale price. The reporting person hereby undertakes to provide upon request to the SEC staff, the issuer or a security holder of the issuer full information regarding the number of shares and prices at which the transaction was effected.

/s/ Stephen D. Chubb

08/19/2020

** 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.