

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person* <b>FOSTER JAMES C</b>  (Last) (First) (Middle) <b>251 BALLARDVALE STREET</b>  (Street) <b>WILMINGTON MA 01887</b>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <b>CHARLES RIVER LABORATORIES INTERNATIONAL INC [ CRL ]</b>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <b>Chairman, President and CEO</b>
	3. Date of Earliest Transaction (Month/Day/Year) <b>02/25/2019</b>	
		6. Individual or Joint/Group Filing (Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock	02/25/2019		s <sup>(1)</sup>		247	D	\$145.96	286,397	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		253	D	\$145.965	286,144	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		400	D	\$145.98	285,744	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		200	D	\$145.985	285,544	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		100	D	\$146	285,444	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		500	D	\$146.01	284,944	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		300	D	\$146.02	284,644	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		200	D	\$146.03	284,444	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		200	D	\$146.05	284,244	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		400	D	\$146.065	283,844	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		100	D	\$146.14	283,744	D	
Common Stock	02/25/2019		s <sup>(1)</sup>		100	D	\$146.195	283,644	D	
Common Stock	02/26/2019		F		2,273	D	\$145.31	281,371	D	
Common Stock								18,390	I	2017 GRAT
Common Stock								25,000	I	2018 GRAT
Common Stock								340	I	By Trust
Common Stock								10,000	I	Held By Spouse

**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 and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	V	(A)	(D)	Date Exercisable	Expiration Date					

**Explanation of Responses:**

1. This sale occurred pursuant to a 10b5-1 Trading Plan.

/s/ James C. Foster

02/26/2019

\*\* Signature of Reporting Person

Date

\* 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.**