| SEC Form 4 |
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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 per response: | 0.5 | | | | | | | | |

| to Sec obligat | this box if no lo tion 16. Form 4 ions may contin | or Form 5 | | - | - | _ | _ | | | NEFICIA | _ | | RSHIP | Estir | | ber: 3 average burde esponse: | 3235-0287 en 0.5 | |
|---|--|-----------|--|-----------|--|----------------------|--|-------------------|-----------------------------------|---|---|--|--------|---|--|---------------------------------------|---------------------------------------|---|
| Instruc | tion 1(b). | | | Filed | or Se | ant to S ection 3 | Section 16(a 30(h) of the | a) of th Inves | he S stme | ecurit nt Co | ies Exchang mpany Act o | e Act of 1 f 1940 | .934 | | | | | |
| 1. Name and Address of Reporting Person* Barbo William D (Last) (First) (Middle) 251 BALLARDVALE STREET | | | | | 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) 02/24/2021 | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below) Corporate Executive VP & CCO | | | | |
| (Street) WILMIN (City) | IGTON M. | - | 1887 Zip) | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | ne) X For For | | | | | | | |
| | | Table | I - No | on-Deriva | tive S | Secu | rities Ac | quir | red, | Dis | posed of | , or Be | nefici | ally Ow | ned | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | | y/Year) Exec | | eemed ution Date, :h/Day/Year | Co | Transaction Di Code (Instr. 5) | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5) | | | nd Secu Bene Own | nount of rities ficially ed Following | For (D) | m: Direct or Indirect Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
| | | | | | Co | de | v | Amount | (A) or (D) | Price | Tran | Reported Transaction(s) (Instr. 3 and 4) | | | (Instr. 4) | | | |
| Common | 02/24/2 | 2021 | | | F | | | 322 | D | \$ <mark>28</mark> 2 | .98 | 98 4,975 | | D | | | | |
| Common Stock | | | | | | | | | | | | | | | 16,975 | | Ι | By Trust |
| | | Tal | ole II · | | | | | | | | osed of, o convertib | | | | ed | | | |
| 1. Title of Derivative Security (Instr. 3) | rity Conversion Date Execution Date, rity or Exercise (Month/Day/Year) if any | | 4. Transaction Code (Instr. 8) 5. Number of Derivative Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | Exj (Mo | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price o Derivativa Security (Instr. 5) | | e S Ily I | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | 1 | I I | | | | | I A | mount | 1 | | | | 1 | |

Explanation of Responses:

/s/ William D. Barbo

Title

Expiration

Date

or Number

of Shares

02/25/2021

** 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).

Code

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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.

(D)

(A)

Date

Exercisable