FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Kochevar Deborah Turner						2. Issuer Name and Ticker or Trading Symbol CHARLES RIVER LABORATORIES INTERNATIONAL, INC. [CRL]									all appli Directo	onship of Reporting all applicable) Director Officer (give title		10% Ov	ner	
(Last) 251 BAI	`	First) LE STREET	(Middle))		Date of /06/20		est Trai	nsaction	n (Mon	ith/Day/Year)			below)			Other (s below)	specify		
(Street) WILMINGTON MA 01887					- 4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(:		(Zip)	lon Dori	vativ	. Soo	uriti	ioc A	oguir/	od D	icpocod a	of or D	onofio	ially	Ownor					
1. Title of Security (Instr. 3) 2. Trans			2. Transact	ion	2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			5. Amount of		unt of es ially Following	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	Transaction(s) (Instr. 3 and 4)		tion(s)			(IIISti. 4)		
Common	Stock			08/06/2	021				M		2,539	A	\$164	1.24	9,	622	D			
Common	Stock			08/06/2	021				S		901	D	\$405.7	729 ⁽¹⁾	8,	,721 D				
Common	Stock			08/06/2	021				S		2,620	D	\$406.6	569 ⁽²⁾	6,	5,101 D				
Common	Stock			08/06/2	021				S		5	D	\$407.	.285	6,	096 D				
		1	able								sposed of , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed tion Date, n/Day/Year)	4. Transa Code (8)				Expira	e Exer ation D h/Day/		7. Title a Amount Securiti Underly Derivati (Instr. 3	of es ing ve Securi and 4)	De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	or Numb of Share							
Stock Options (Right to	\$164.24	08/06/2021			M			2,539	05/11	/2021	05/11/2030	Common	n 2,53	89	\$0	0		D		

Explanation of Responses:

- 1. This transaction was executed in multiple trades at prices ranging from \$405.18 to \$406.17. 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 \$406.19 to \$407.09. 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/ Deborah T. Kochevar

08/10/2021

** 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.