FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Machinaton	$D \subset$	205/10
Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0362							
l	Estimated average burden								
l	hours per response:	1.0							

Form 3 Holdings Reported.

Instruction 1(b)

Form 4	Transactions R	eported.	File	ed pursuant to or Section					ities Excha ompany Ac								
1. Name and Address of Reporting Person* MILNE GEORGE M JR				2. Issuer Name and Ticker or Trading Symbol CHARLES RIVER LABORATORIES INTERNATIONAL INC [CRL]					5 (1	Relationship of Reporti (Check all applicable) X Director				10%	Owner -		
(Last) (First) (Middle) 251 BALLARDVALE STREET				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/29/2018						Year)	Officer (give titl below)				Oth belo	er (specify w)	
(Street) WILMINGTON MA 01887 (City) (State) (Zip)				4. If Amen	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					
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date (Month/Day/Year)				Transaction Of (D) (Instr.				or Disposed	Secur Benef		es	Form	6. Ownership Form: Direct (D) or	7. Nature of Indirect Beneficial Ownership			
				(montain Day, i cair)		5,		Amou	nt	(A) or (D)	Price		Issuer's Fiscal Year (Instr. 3 and 4)		Indirect (I) (Instr. 4)		(Instr. 4)
Common Stock 12/03/2018			G		j	5,	,240	D	D \$0		24,343			D			
Common Stock												1,000			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. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instrand 5	rative rities ired r osed . 3, 4	6. Date Exercisable an Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date Expiration Date Expiration Date		ation Date th/Day/Year) Amount of Securities Underlying Derivative Security (Instrand 4) Amount Amount or Numk		Amount or Number	nt er		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownersh Form: Direct (D) or Indirec (I) (Instr.	Beneficial Ownership t (Instr. 4)

Explanation of Responses:

/s/ George M. Milne, Jr. 01/23/2019

** 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.