## FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington.	D.C.	20549	

## ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPI	ROVAL
OMB Number:	3235-0362
Estimated average b	urden

1.0

hours per response

Form 3 Holdings Reported.

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date,	ive Secur uts, calls, 4. Transaction Code (Instr. 8)	5. No of Derig	Acquerants,	6. Da Expir	ions, c	isable and	7. Tit Amor Secu	eneficia ecurities le and unt of urities erlying rative	8. De Se			i S Ily	10. Ownersh Form: Direct (D) or Indirec	Beneficial Ownership
Common	Stock		10/15/2010			G		5,0	000	D	\$32.7	77 289,225 D		D	II II D		
Common	Stock		05/07/2010			S4 105 D \$30.77		77	7 340			I By Tr					
Common			05/07/2010			S <sub>4</sub>		20 D \$30.78 445					By Trust <sup>(1)</sup>				
Common			02/10/2010			P4 P4		5		A	\$34.47		465			I	By Trust <sup>(1)</sup>
Common Common			06/29/2009			P4 P4		315 5		A	\$33.05 \$34.47		_	455		I	By Trust <sup>(1)</sup>
Common			06/24/2009			P2			55	A	\$32.			.40		I	By Trust <sup>(1)</sup>
Common	Stock		06/22/2009			P	4		75	A	\$32.0			75 I By Tru		By Trust <sup>(1)</sup>	
		(Month/Day/Year)	if any (Month/Day/Year)		Code (Instr. 8)		Amoun	ıt	(A) or (D) Price		Deneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		at end of Fiscal	Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership (Instr. 4)	
1. Title of Security (Instr. 3)  2. Transaction Date				2A. Deemed Execution Date,		3. Transaction		red, Disposed of, or Benefic 4. Securities Acquired (A) or Dispose Of (D) (Instr. 3, 4 and 5)					5. Amou Securiti	unt of	6. Ownership		7. Nature of Indirect
(City)	(St		Zip) <b>E. I Non-Deri</b> v	vative Sec	uriti	es Ac	auire	ed Dis	snosed	of or	Benefic	rially					
(Street) WILMINGTON MA 01887				4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(Last) 251 BAL	(Fii LARDVAL	rst) (I	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2010						/Year)	Х	Office below	•	title Other (spelow)		er (specify ow)	
	nd Address of	Reporting Person* SC		2. Issuer Name <b>and</b> Ticker or Trading Symbol CHARLES RIVER LABORATORIES INTERNATIONAL INC [ CRL ]			<u>.</u>		ck all app	,	ting Pe	. ,	6 Owner				

## **Explanation of Responses:**

1. The reporting person is a trustee of three family trusts (and in one such trust is also a beneficiary). The reporting person reports beneficial ownership of the shares of the issuer held by these family trusts but disclaims beneficial ownership except to the extent of his pecuniary interests therein.

> /s/James C. Foster \*\* Signature of Reporting Person

02/07/2011

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).

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.

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).