SEC Form 4

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

•••••••••••										
OMB Number: 3235-0										
Estimated average burden										
hours per response:	0.5									

Dubigations may continue. See Filed pursuant to Section 16(a) of the Securities Exchan or Section 30(h) of the Investment Company Act												1934		hours	s per resp	oonse:	0.5	
1. Name and Address of Reporting Person* Girshick Birgit (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) 02/22/2023													Owner (specify /)
(Street) WILMIN (City)	4. If Amendment, Date of Original Filed (Month/Day/Year)								ne) X Form Form									
		Table	I - No	n-Deriva	tive S	Secur	ities	Acq	uired,	Dis	posed of	, or B	enefici	ally Own	ed			
1. Title of Security (Instr. 3) Date (Month/Day						Execution Da		Date,	Code (Instr.				red (A) or str. 3, 4 a	nd Securi Benefi Owned	Securities For Beneficially (D)		Direct of Indirect E tr. 4) 0	7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Code	v	Amount	(A) oi (D)	Price	Transa				iiisu. 4)	
Common Stock 02/22/2						2023		F		308	D	\$24	3.6 4	0,730	1	D		
	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)	if any	emed ion Date, /Day/Year)	4. Transa Code (1 8)			6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or		8. Price of Derivative Security (Instr. 5) Beneficia Owned Following Reported Transacti (Instr. 4)		ly D oi (I)	0. ovmership orm: irrect (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

/s/ Birgit Girshick

Title

Number

of Shares

<u>02/22/2023</u>

** 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 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.

(A) (D)

Date Exercisable

Expiration Date