Edgar Filing: HENRY SCHEIN INC - Form 4

HENRY SCH Form 4 July 02, 2015	EIN INC									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OME Check this box if no longer subject to Section 16. STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Expi						N OMB Number: Expires: Estimated a burden hou response	ours per			
(Print or Type Re 1. Name and Ad Rekow E Dia	dress of Reporting	Person <u>*</u>	Symbol	Name and		-	5. Relationship o Issuer			
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year) 06/30/2015				(Check all applicable) _X_ Director 10% Owner Officer (give title Other (specify below)			
			ndment, Dat th/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				
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	ecurities Ac	quired, Disposed o	of, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Dat (Month/Day/Year)	Execution any		3.	4. Securit onAcquired Disposed (Instr. 3, 4	ies (A) or of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	-	
Stock, par value \$0.01 per share							3,087	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

Edgar Filing: HENRY SCHEIN INC - Form 4

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. Transactic Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. D Se (Ii
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Deferred Compensation Plan Phantom Stock	<u>(1)</u>	06/30/2015		А	116 (2)	(3)	(3)	Common Stock, par value \$0.01 per share	116	

Reporting Owners

Reporting Owner Name / Address		Relationsh						
	Director	10% Owner	Officer	Other				
Rekow E Dianne C/O HENRY SCHEIN, INC. 135 DURYEA ROAD MELVILLE, NY 11747	Х							
Signatures								
/s/ Jennifer Ferrero (as Attorne Rekow)	07/02/2015							

**Signature of Reporting Person

Date

Explanation of Responses:

- 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).
- (1) Each share of phantom stock is the economic equivalent of one share of the Issuer's common stock.

Represents the number of shares of phantom stock credited to the reporting person's phantom stock account pursuant to the Issuer's Non-Employee Director Deferred Compensation Plan (the "Plan"), representing an exempt transaction under the Plan. The number of (2) shares of phantom stock credited to the reporting person's phantom stock account is determined by dividing the amount of deferred eligible director fees by the closing price of a share of Issuer common stock on the award date.

- The balance in the reporting person's phantom stock account is distributed to the reporting person in Issuer common stock following the (3) termination of the reporting person's directorship, the reporting person's death or disability or a change of control of the Issuer.
- Represents the aggregate number of shares of phantom stock allocated to the reporting person under the Plan as of the award date based (4) on the closing price of a share of the Issuer's common stock on the award date.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.