## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

OMB APPROVAL S IN BENEFICIAL OWNERSHIP

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

1. Name and Address of Reporting Person*  Molho Davide  (Last) (First) (Middle)  251 BALLARDVALE STREET					2. Issuer Name and Ticker or Trading Symbol CHARLES RIVER LABORATORIES INTERNATIONAL INC [ CRL ]  3. Date of Earliest Transaction (Month/Day/Year) 02/27/2017									ck all app Direct Office belo	onship of Reporting Persor all applicable) Director Officer (give title below) Corporate Executive			10% Owner Other (specify below)	
(Street) WILMING*		ate) (	)1887 Zip)	on-Deriv	-	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Che Line)  X Form filed by One Reporting Form filed by More than One Person  ive Securities Acquired, Disposed of, or Beneficially Owned										porting Pers	son		
Da Da			2. Transaction Date (Month/Day/Year)		Exe if a	2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4 5)			and Securitie Beneficia		ies cially Following	Forn (D) c	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	v	Amount	(A) (D)	Price	е	Transa (Instr. 3	ction(s)			(Instr. 4)		
Common Stock				02/27/2017					F		658	D	\$88	3.05	43	3,133		D	
Common Sto	ock		0						F		654	Г	\$89	9.54 42		2,479		D	
Common Stock														30,493			I	By Revocable Trust	
		Та									osed of, convertib				wned				
Security or (Instr. 3) Pr	onversion r Exercise rice of erivative ecurity	3. Transaction Date (Month/Day/Year)	3A. Deer Execution if any (Month/I		4. Transa Code ( 8)	Instr.	of	r osed (, 3, 4	6. Date Expirati (Month/	ion Da Day/Y	Securities Underlying Derivative Security (Insand 4)  Ammor Nun Expiration of		Amount or Number	De Se (In	Price of ivative curity security setr. 5) Securities Beneficial Owned Following Reported Transactic (Instr. 4)		ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

/s/ Davide A. Molho

02/28/2017

\*\* 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.