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 |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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

| Name and Address of Reporting Person* Wolf Christine Ann | | | | | 2. Issuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [WCC] | | | | | | | | cc] | | k all app Direc | ctor | | 10% Ov | vner | |
|--|--|-----------|------------|---|---|---|--------|---|---------------------|---|--------------------|---|---|--|--|--|---------------------------------------|---|------------|--|
| (Last) | • | First) (I | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 03/31/2023 | | | | | | | | | X | Officer (give title below) EVP & (| | | Other (specify below) | | |
| SUITE 700 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | |) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | | |
| (Ctroot) | | | | | 1 | | | | | | | | | X | X Form filed by One Reporting Person | | | | | |
| (Street) PITTSBURGH PA 15219 | | | | | | | | | | | | | | Form filed by More than One Reporting Person | | | | | | |
| (City) | (\$ | State) (2 | Zip) | | Rul | le 10 |)b5- | 1(c) | Tran | sac | tion Indi | catio | on | | | | | | | |
| Check this box to indicate that a transaction was made pursual satisfy the affirmative defense conditions of Rule 10b5-1(c). See | | | | | | | | | | | | | | | | | | | | |
| | | Table | I - No | n-Deriva | tive S | Secui | rities | Acc | uired | , Dis | posed of | , or E | Benefi | cially | y Own | ed | | | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Day | | | | Execu y/Year) if any | | Deemed cution Date, y nth/Day/Year) | | 3. Transaction Code (Instr. 8) 4. Securities Acq Disposed Of (D) (5) | | | | Acquired (A) or (D) (Instr. 3, 4 and | | Beneficially Owned Following | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pr | ice | Reported Transaction(s) (Instr. 3 and 4) | | | | (Instr. 4) | |
| Common | nmon Stock 03/31/ | | | | 2023 | | | A | | 38.6842 | A ⁽ | (1) \$ | 0.00 | 00 41,427.6842 | | | 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) | vative Conversion Date Execution Date irity or Exercise (Month/Day/Year) if any | | tion Date, | 4. Transaction Code (Instr. 8) | | 5. Number of 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 Securities Underlying Derivative Security (Inst 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | | 9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | | |
| | | | | | Code V | | (A) | (D) | Date Exercisable | | Expiration Date | Title | Amous or Number of Shares | er | | | | | | |

Explanation of Responses:

1. Represents dividend equivalent rights ("DERs") in connection with the Issuer's quarterly dividend and accrued to the Reporting Person on restricted stock units held by the Reporting Person. These DERs vest on the same schedules as the underlying awards.

Remarks:

/s/ Michele Nelson, as Attorney-in-Fact

04/04/2023

** Signature of Reporting Person

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.