Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

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

1. Name and Address of Reporting Person* BRYAN GLYNIS					2. Issuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [WCC]										all app	ionship of Reporting all applicable) Director		n(s) to Is 10% Ov	
(Last)						3. Date of Earliest Transaction (Month/Day/Year) 12/29/2023									Office below	er (give title v)		Other (s	specify
225 WEST STATION SQUARE DRIVE SUITE 700						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) PITTSBURGH PA 15219-1122															X Form filed by One Reporting Person Form filed by More than One Reporting Person				
						le 10)b5-	1(c)	Trar	ารลด	tion Indi	catio	on						
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	on-Deriva	tive S	Secui	rities	Acc	quirec	l, Dis	posed of	, or B	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)				Year) Execut		eemed tion Date, h/Day/Year)		3. Transaction Code (Instr. 8) 4. Securities Disposed Of			Acquired (A) of (D) (Instr. 3, 4		and 5) Secu Bene Own		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount	(A) o	Price)		ed ection(s) 3 and 4)			(111501.4)			
Common	Common Stock 12/29/20					23			A		0.5974(1)	A	\$	0	277.5974		D		
Common Stock 12/29/20)23			A		144.404(2)	A	\$17	3.88	422.0014		D			
		Tal	ble II						,		osed of, c			•	Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu	eemed ution Date, h/Day/Year)	4. Transa Code (8)			vative rities pired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) Amount or Number of Title Shares		t		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dir or (I)	nership	11. Nature of Indirect Beneficial Ownership (Instr. 4)

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. Each DER is the economic equivalent of one share of Issuer's common stock and vests on the same schedule as the underlying award
- 2. Represents deferred share units ("DSUs") credited to the Reporting Person's deferred compensation account pursuant to the Issuer's Deferred Compensation Plan for Non-Employee Directors (the "Plan"). Each DSU is the economic equivalent of one share of Issuer's common stock and is eligible for distribution in the form of Issuer's common stock based on the schedule elected by the Reporting Person in accordance with the Plan.

/s/ Michele Nelson, as 01/03/2024 Attorney-in-Fact

** 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.