Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vvasnington,	D.C. 20549	

Check this box if no longer subject	STATEMENT OF
to Section 16. Form 4 or Form 5	
obligations may continue. See	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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* <u>GRIFFIN BOBBY J</u>						2. Issuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [WCC]										o of Reportir licable) tor	ng Per	son(s) to Is	
(Last)	,	,	Middle)		3. Date of Earliest Transaction (Month/Day/Year) 12/29/2023									Office	er (give title v)		Other (s	specify
225 WEST STATION SQUARE DRIVE SUITE 700				4. If /	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street)	URGH PA	. 1	5219												Form Perso	filed by Mo	re thar	n One Repo	orting
(City)	(Si	ate) (2	Zip)		$ _{\Box}$	Check t	his box	to ind	icate tha	at a trar	nsaction Indinsaction was m	ade pui	rsuant to a	contra	act, instr ı 10.	uction or writt	en plar	n that is inter	nded to
		Table	I - N	on-Deriva	tive S	Secu	rities	Ac	quire	d, Di	sposed of	, or E	Benefic	ially	Own	ed			
Dat			2. Transacti Date (Month/Day	Executh/Day/Year) if any		eemed ution Date, r th/Day/Year)				4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			d 5)	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) c (D)	Price			ction(s) 3 and 4)			(Instr. 4)
Common	Stock			12/29/20	023				A		55.3226(1)	A	\$0.0	000	000 27,756.4756 D				
Common	Stock			12/29/20	023				A		98.847(2)	A	\$173	3.88 27,855.3226 D					
		Tal	ble II								oosed of, convertib				Owne	d			1
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exec	eemed ution Date, th/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expira	e Exer ation D h/Day/		7. Titl Amou Secur Under Derive Secur 3 and	int of rities rlying ative rity (Instr. 4)	Der	3. Price of Derivative Security Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owners Form: Direct (I or Indire (I) (Instr	Ownership	11. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	or Number of								

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 Attorney-in-Fact 01/03/2024

** 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.