Instruction 1(b).

FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT	OF CHANGES	S 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

1. Name and Address of Reporting Person* NAGARAJAN SUNDARAM				2. Issuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [WCC]										ationship k all app Direc	•	ng Per	rson(s) to Is		
(Last)	(Fil	rst) (N	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 09/29/2023										Officer (give title below)		Other (s	specify
225 WEST STATION SQUARE DRIVE SUITE 700					4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X	,						
(Street)	(Street) PITTSBURGH PA 15219-1122													Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	Zip)		$ _{\Box}$	Rule 10b5-1(c) Transaction Indication 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	d, Dis	sposed of	, or E	Benefi	cially	Own	ed			
Date			2. Transacti Date (Month/Day	Execut (Year) if any		eemed ution Date, th/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3,				Securi Benefi Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) ((D)	Pric	е	Transa	action(s) 3 and 4)			(Instr. 4)
Common Stock				09/29/20	.023				A		6.2984(1)	A	\$	0.00 2,4		21.8751		D	
Common Stock 0			09/29/20	023				A		208.594(2)	A	\$1	13.82	2,630.4692			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)	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)	(Instr.	of	ired r osed) r. 3, 4	Expira	ation D h/Day/		7. Titl Amou Secur Under Derive Secur 3 and	int of rities rlying ative rity (Inst	Dei See (In:	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	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 ("RSUs") 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.

Remarks:

/s/ Michele Nelson, as 10/03/2023 Attorney-in-Fact

** 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.