FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

VIIIEO F	7110	LAU	יורווי	UCL	COIVI	IVIIOO	
Washington	DC 2	0549					

OMB AP	ROVAL
OMB Number:	3235-0287
Estimated average	hurden

0.5

hours per response:

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

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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(0). 0	ee mstructio	311 10.																				
Name and Address of Reporting Person* RAYMUND STEVEN A					2. Issuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [WCC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable)										
RAYMUND STEVEN A													√ D	irecto	or		10% O\	wner				
(Last) (First) (Middle) 225 W. STATION SQUARE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 12/31/2024										fficer elow)	(give title		Other (s below)	specify			
SUITE 7	00																					
SUITE /00					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable									
(Street)																Line)						
PITTSBI	IIRGH	РΔ	1	5219												Form filed by One Reporting Person Form filed by More than One Reporting						
TITIOD	ORGII	171		3217													ersor		re mai	n One Repo	orung	
(City)		(State	e) (Z	Zip)																		
			Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or	Ben	efici	ally O	vne	d				
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Ad Disposed Of (D 5)			s Acq of (D)	quired ((Instr. :	(A) or 3, 4 ar	4 and Secur Benef Owner		curities F neficially (I		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount	() 1)	A) or D)	Price	Tra	Transaction(s) (Instr. 3 and 4)				(111501.4)		
Common Stock 12/31/2					2024				A		56.4374(1)	A	\$() 2	7,12	1.3088		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)	Derivative Conversion Date Execution Security or Exercise (Month/Day/Year) if any		ion 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 (Ins 3 and 4)		f g	8. Price Derivati Security (Instr. 5	ve /	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G F D o (I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
			Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Amou or Numb of Share		nber										

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.

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

01/03/2025

** 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.