FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | | |
| Estimated average burden | | | | | | | | | | |

0.5

hours per response:

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

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* WINDROW KIMBERLY G (Last) (First) (Middle) | | | | | | | Susuer Name and Ticker or Trading Symbol WESCO INTERNATIONAL INC [WCC] Just of Earliest Transaction (Month/Day/Year) | | | | | | | | | ieck all appli Directi | or r (give title | | son(s) to Iss 10% Ov Other (s below) | vner | | |
|---|--|--|---|-------|------------------------|--|---|---------|-----|-----------------------------------|------|---|--|---------------|---|---|---|----------------|--|--|--|--|
| 225 WEST STATION SQUARE DRIVE SUITE 700 | | | | | | | 02/16/2015 | | | | | | | | | | SVP and CHO 5. Individual or Joint/Group Filing (Check Applicable | | | | | |
| (Street) PITTSBURGH PA 15219 | | | | | - | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Lin | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (5 | - | (Zip) | | | | | | | | | | | | | | | | | | | |
| Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | action | ction 2A. Deemed Execution Da | | | ,, | 3. Transaction Code (Instr. | | 4. Securities Acquired (A Disposed Of (D) (Instr. 3, | | d (A) or | 5. Amou Securiti Benefic | int of es ially Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | | | Code | v | Amount | | (A) or (D) | Price | Transac (Instr. 3 | ion(s) | | | (Instr. 4) | | |
| Common Stock 02/16/ | | | | | | | 2015 | | | M ⁽¹⁾ | | 1,165 | | A | \$0.0 | 0 8, | 8,341 | | D | | | |
| Common Stock 02/16/ | | | | | | ′2015 | | | | F | | 420 | | D | \$68. | .2 7,921 | | | 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) | 3A. Deemed Execution Dr if any (Month/Day/ | Date, | ate, Transa Code (I | | of I | | Exp | Date Exe piration onth/Da | Date | ble and | 7. Title and Amount of Securities Underlying Derivative Sect (Instr. 3 and 4) | | 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4) | e s Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | v | (A) | (A) (D) | | te ercisabl | | xpiration ate | Title | | Amount or Number of Shares | | | | | | | |
| Restricted Stock | (2) | 02/16/2015 | | | М | | | 1.165 | | (3) | | (3) | Com | nmon | 1.165 | \$0.00 | 0 | I | D | | | |

Explanation of Responses:

- 1. Reflects settlement of restricted stock units, the grant of which was previously reported on a Form 4, following the vesting of the restricted stock units.
- 2. Each restricted stock unit represents a right to receive one share of common stock.
- 3. The restricted stock units vested in full on February 16, 2015.

Remarks:

/s/ Samantha L. O'Donoghue, Attorney-In-Fact

02/18/2015

** 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.