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								
hours per response:								

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b)

Name and Address of Reporting Person* SCHRIESHEIM ALAN				<u>H</u>	HEICO CORP [HEI, HEI.A]								Relationship neck all appli X Direct	cable)	g Perso	n(s) to Issu		
(Last)	(First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 01/04/2024								Officer below)	fficer (give title elow)		Other (s below)	pecify	
3000 TAFT STREET				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) HOLLYWOOD FL 33021														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate)	(Zip)		Rı	Check this box to indi				Transaction Indication cate that a transaction was made pursuant to a contract, instruction or written plan that is intended to defense conditions of Rule 1005-1(c). See Instruction 10.							to	
		Tab	ole I - No	n-Deri	vativ	e Se	curit	ies Ac	quired	, Dis	sposed o	of, or B	eneficia	lly Owned				
Date				saction /Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4		ed (A) or str. 3, 4 and	Benefic	es	Form: (D) or	orm: Direct) or Indirect	7. Nature of Indirect Beneficial Ownership	
								, , ,		v	Amount	(A) o	Price	Transac	Reported Transaction(s) (Instr. 3 and 4)			Instr. 4)
Common Stock				01/04/2024		1			M		44,000) A	\$0.57	13 14	147,111		D	
Common	Stock			01/04	4/2024	1			F		145	D	\$173.	96 14	6,966		D	
Class A C	Common St	ock													455 D			
Common	Stock													11				By 409A Plan ⁽¹⁾
Class A C	Common St	ock												1 6416 1 1 1				By 409A Plan ⁽¹⁾
Class A C	Common St	ock												10,488 I By				By Estate ⁽²⁾
		-	Table II -								osed of			/ Owned				
1. Title of Derivative Security (Instr. 3) 2. Conversion or Exercise Price of Derivative Security Output Output		ed Date,	d 4. Date, Transactio Code (Inst		5. Number on of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amor of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	e (Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa	ible	Expiration Date	Title	Amount or Number of Shares					
Option (Right to purchase Common Stock)	\$0.5713	01/04/2024			M			44,000	(3)		(3)	Common	44,000	\$0	100,89)3	D	

Explanation of Responses:

- 1. Represents shares held for the Reporting Person by the HEICO Corporation Leadership Compensation Plan (409A Plan).
- 2. Represents shares held by the estate of deceased spouse.
- 3. These options became exercisable on various dates and expire 180 days following the date the Reporting Person ceases to serve as a Director of the Registrant.

Remarks:

/s/ Alan Schriesheim

01/0<u>5/2024</u>

** 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.