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	. 0.5							

Check this box if no longer subject to Section 16. Form 4 or Form 5 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* Henrici Peter					2. Issuer Name and Ticker or Trading Symbol VISHAY INTERTECHNOLOGY INC [VSH]						(Che	ck all app	tionship of Reportin all applicable) Director Officer (give title		rson(s) to Is 10% Ov Other (s	wner			
(Last)	(Fir HAY INTE	rst) (M	Middle)	C.	3. Date of Earliest Transaction (Month/Day/Year) 02/27/2024								-	belov	v) ``		below) e Development		
63 LANCASTER AVE					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)						
(Ctroot))	X Form filed by One Reporting Person				on	
(Street) MALVE	RN PA	. 1	9355										Form filed by More than One Reporting Person				orting		
(City)	(Sta	ate) (Z	Z ip)		Rul	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 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da			Execution Date,				es Acquired (A) o Of (D) (Instr. 3, 4 a			Benefic Owned	ties Folicially (D)		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership					
						Code	v	Amount	(A) (D)	or	Price	Report Transa (Instr. 3	action(s) 3 and 4)			(Instr. 4)			
Common Stock 02/2			02/27/2	2024		A		13,170(1	170 ⁽¹⁾ A		\$ <mark>0</mark>	0 21,482			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)	erivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any			saction e (Instr. 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)		S (I	. Price of lerivative ecurity nstr. 5)	ive derivative Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)				
					Code V		(A)	(D)	Date Exercisable		Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

1. Represents the number of restricted stock units granted to the Reporting Person on February 27, 2024 as part of the Registrant's 2023 Long-Term Incentive Plan. The 13,170 restricted stock units vest ratably over a three-year period. In the event that the services of the Reporting Person cease prior to the expiration of such three-year period, the restricted stock units will vest in accordance with the terms of the Reporting Person's employment agreement. Each restricted stock unit represents a right to receive one share of the registrant's common stock.

/s/ David L. Tomlinson as

attorney-in-fact for Peter 02/29/2024

Henrici

** 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.