## FORM 5

Check this box if no longer subject to

## **IINITED STATES SECURITIES AND EXCHANGE COMMISSION**

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		Washington	D C 20540	1

wasnington, D.C. 20549	OMB APPROVAL		
ANNUAL STATEMENT OF CHANGES IN BENEFICIAL	OMB Number:	3235	

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OMB Number:	3235-0362
Estimated average	burden
hours per response	: 1.0

Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Form 3 Holdings Reported. Form 4 Transactions Reported.

> 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 10b5-1(c).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

**OWNERSHIP** 

1. Name and Address of Reporting Person*  ALVAREZ CESAR L					2. Issuer Name and Ticker or Trading Symbol WATSCO INC [ WSO; WSOB ]					(Ch	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)    Director 10% Owner					
(Last) 2665 S. I	(Fi	rst) (	Middle)		3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2024						Officer (give title below)  Director  Officer (give title below)					
SUITE 901   (Street)   MIAMI   FL   33133   (City)   (State)   (Zip)					dmen	t, Date	of Origin	nal Fil	ed (Month/D	ay/Year)	Lin	Form f	iled by O	ne Rep	g (Check Ap orting Person n One Repo	n
		Tabl	e I - Non-Deriv	ative Sec	uriti	es A	cquire	d, D	isposed (	of, or B	eneficia	lly Owne	d			
Date (Month/Day/Year)			2A. Deemed 3. Transa if any Code (		saction		curities Acquired (A) or Disposed ) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned at end of		Ownership Indir Form: Direct Bene		eficial		
			(Month/Day/Year)		ear)   8)		Amou		(A) or Price		Issuer's Fiscal Indire		(D) or Indirect (Instr. 4			
		Т	able II - Deriva (e.g., p	itive Secu outs, calls								y Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number 6. Date Exercisable and 7. Expiration Date An Derivative Securities (Month/Day/Year) Se Acquired Ur		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	derivative Securities		Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownershi (Instr. 4)			
			(A) (D)		(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
Stock Option (right to buy)	\$175.07						(1)		06/01/2025	Commor	2,500		2,50	00	D	

## Explanation of Responses:

1. The options vested June 1, 2022.

/s/ Cesar L. Alvarez

01/09/2025

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).