Edgar Filing: OCONNOR KEVIN M - Form 4

| OCONNOR Form 4 | KEVIN M | | | | | | | | | | |
|---|--|---|---|--|---|--------|--|--|---|---|--|
| September 0 | 7, 2007 | | | | | | | | | | |
| FORN Check thi | 14 UNITED | UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 | | | | | | | | PROVAL 3235-0287 | |
| if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b). | rsuant to S (a) of the P | F CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940 | | | | | Expires: January 31 2005 Estimated average burden hours per response 0.5 | | | | |
| (Print or Type F | Responses) | | | | | | | | | | |
| OCONNOR KEVIN M Sy | | | 2. Issuer Name and Ticker or Trading Symbol SOLECTRON CORP [SLR] | | | | ıg | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Month/I 847 GIBRALTAR DRIVE 09/06/2 (Street) 4. If Ame | | | 3. Date of Earliest Transaction(Month/Day/Year)09/06/2007 | | | | | (Check all applicable) Director 10% Owner Officer (give title Other (specify below) Executive Vice President | | | |
| | | | | mendment, Date Original Aonth/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person | | | |
| MILPITAS, | CA 95035 | | | | | | | Form filed by M Person | ore than One Re | porting | |
| (City) | (State) | (Zip) | Table I - | Non-D | erivative S | Securi | ties Acqu | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3) | 2. Transaction Dat (Month/Day/Year) | | Date, if Tra Coc ay/Year) (Ins | nsaction | 4. Securiti n(A) or Dis (Instr. 3, 4) Amount | posed | of (D) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| Common Stock | 09/06/2007 <u>(1)</u> | | S | | 36,625 | D | \$ 4.012 | 1,053,295 | D | | |

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

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 control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

Reporting Owners

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| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | 4. Transactic Code (Instr. 8) | 5. of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | Amou Unde Secur | le and int of rlying ities . 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Own Follo Repo Trans (Instr |
|---|---|---|--|---|---------------------|--------------------|-----------------------|---|---|---|
| | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Address | | | Relationships | | | |
|--|----------|-----------|--------------------------|-------|--|--|
| | Director | 10% Owner | Officer | Other | | |
| OCONNOR KEVIN M 847 GIBRALTAR DRIVE MILPITAS, CA 95035 | | | Executive Vice President | | | |
| Signatures | | | | | | |
| By: Todd DuChene For: Kevin O'Connor | | 09/07 | //2007 | | | |
| **Signature of Reporting Person | | Da | te | | | |

Explanation of Responses:

* 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).

(1) Sales reported on this Form 4 are pursuant to a 10b5-1 Plan adopted by the reporting person on December 29, 2005.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.