Edgar Filing: SYSCO CORP - Form 4

| SYSCO COF | RP | | | | | | | | | | |
|--|--|--|---|---|----------------|----------------|--|--|------------------|----------------------------|--|
| Form 4 July 05, 2005 | 5 | | | | | | | | | | |
| FORM A | | | | | | | | OMB APPROVAL | | | |
| | ITIES AND EXCHANGE COMMISSION hington, D.C. 20549 | | | | | OMB Number: | 3235-0287 | | | | |
| Check thi if no long subject to Section 1 Form 4 or Form 5 obligatior | 6. Filed purs | STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, | | | | | | | | | |
| may conti See Instru 1(b). | inue. Section 17(a | | | ility Hold vestment | • | · · | • | 1935 or Section 0 | n | | |
| (Print or Type R | Responses) | | | | | | | | | | |
| GOLDEN JONATHAN Symbol | | | Symbol | er Name and Ticker or Trading O CORP [SYY] | | | | 5. Relationship of Reporting Person(s) to Issuer | | | |
| (Last) | | | | Earliest Transaction | | | | (Check all applicable) | | | |
| 1390 ENCLAVE PARKWAY5. Date of (Month/D 06/30/20 | | | - | | | | Officer (give title 0/ 0/ 0/ 0/ 0/ 0/ 0/ 0/ 0/ 0/ 0/ 0/ 0/ | | | | |
| | | | ndment, Date Original th/Day/Year) | | | | 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting | | | | |
| HOUSTON, | , TX 77077-2099 | | | | | | | Form filed by M Person | lore than One Re | porting | |
| (City) | (State) (| Zip) | Table | e I - Non-D | erivative | Secur | ities Acq | uired, Disposed of | , or Beneficial | ly Owned | |
| 1.Title of Security (Instr. 3)2. Transaction Date (Month/Day/Year)2A. Deemed Execution Date, if any (Month/Day/Year) | | | 3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) | | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | | |
| | | | | Code V | Amount | or (D) | Price | (Instr. 3 and 4) | | | |
| Common Stock | 06/30/2005 | | | А | 209 <u>(1)</u> | А | \$ 35.85 | 30,375 | D | | |
| Common Stock | 06/30/2005 | | | А | 104 (2) | А | \$ 35.85 | 30,479 | D | | |
| Common Stock | | | | | | | | 18,500 | I | Estate (Trust No. 3) | |

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

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number.

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 Date, if any (Month/Day/Year) | 4. Transactio Code (Instr. 8) | 5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | ate | 7. Titl Amou Under Secur (Instr. | unt of rlying | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secu Bene Owno Follo Repo Trans (Instr |
|---|---|---|---|--|---|---------------------|--------------------|--|--|---|--|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | |

Reporting Owners

| Reporting Owner Name / Addre | ess | Relationships | | | | | | |
|--|------------|---------------|---------|-------|--|--|--|--|
| | Director | 10% Owner | Officer | Other | | | | |
| GOLDEN JONATHAN 1390 ENCLAVE PARKWA HOUSTON, TX 77077-2099 | | | | | | | | |
| Signatures | | | | | | | | |
| Jonathan Golden | 07/05/2005 | | | | | | | |
| <u>**</u> Signature of | Date | | | | | | | |

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) Represents shares elected to be received in lieu of a portion of non-employee director annual cash retainer fees pursuant to Non-Employee Directors Stock Plan.
- (2) Represents company match equal to 50% of shares described in Footnote 1.

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.

Reporting Person