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LANKFOR	D JAMES E										
Form 4											
September	12, 2005										
FORM	Л 4		~ ~ ~ ~			~~~		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~		PPROVAL	
	UNITED	STATES		RITIES A			NGE	COMMISSIO	N OMB Number:	3235-0287	
Check t									Expires:	January 31,	
if no loi subject		MENT OF	F CHAI	NGES IN	BENEF	ICIA	LOV	WNERSHIP OI	Estimated	2005 average	
Section				SECUI	RITIES				burden hou	-	
Form 4									response	•	
Form 5 obligati	000							nge Act of 1934,			
may con	ntinue. Section 170			Itility Hol	•	- ·		of 1935 or Secti 940	ion		
<i>See</i> Inst 1(b).	ruction	50(11)		livestillen	i Compa	1y 110	. 01 1	J +0			
1(0).											
(Print or Type	Responses)										
1. Name and	Address of Reporting	Person [*]	2. Issue	er Name an	d Ticker or	Tradin	ng	5. Relationship	of Reporting Per	rson(s) to	
LANIZEODD LANEGE				Symbol				Issuer			
			SYSCO	O CORP [[SYY]				1 11 1. 11	``	
(Last)	(First) (Middle)	3. Date of	of Earliest T	ransaction			(Ch	eck all applicabl	e)	
				Day/Year)				Director	109	% Owner	
			09/08/2	09/08/2005				X_ Officer (give title Other (specify below) below)			
								· · · · · · · · · · · · · · · · · · ·	P, Foodservice C	Ops	
	(Street)		4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
			Filed(Mo	onth/Day/Yea	r)			Applicable Line)			
									y One Reporting P More than One R		
HOUSTON	N, TX 77077-2099)						Person		sporting	
(City)	(State)	(Zip)	Tab	le I - Non-l	Derivative	Securi	ities A	cquired, Disposed	of, or Beneficia	lly Owned	
1.Title of	2. Transaction Date	2A. Deeme	ed	3.	4. Securit			5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year)	Execution	Date, if	Transactio				Securities	Form: Direct	Indirect	
(Instr. 3)		any (Month/Da	v/Year)	Code (Instr. 8)	Disposed (Instr. 3, 4)	Beneficially Owned	(D) or Indirect (I)	Ownership	
		(infontin/Du	.,, i cui)	(msu: o)	(111541. 5),	i una o)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s) (Instr. 3 and 4)			
				Code V	Amount	(D)	Price	(msu: 5 and 4)			
Reminder: Re	port on a separate line	e for each cla	ass of sec	urities bene	ficially ow	ned dir	ectly o	or indirectly.			
								pond to the colle		SEC 1474	
					inforn	nation	cont	ained in this form	n are not	(9-02)	

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)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of	8
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities	С
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)	S

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(Instr. 3)	Price of Derivative Security	(Month/Day/Y	/ear) (Instr. 8)	Acquired (A or Disposed (D) (Instr. 3, 4, and 5)				(
			Code V	(A) ((D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Stock Options (Right to buy)	\$ 33.01	09/08/2005	A	39,000	<u>(1)</u>	09/07/2012	Common Stock	39,000

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
LANKFORD JAMES E 1390 ENCLAVE PARKWAY HOUSTON, TX 77077-2099			Sr VP, Foodservice Ops			
Signatures						

Signatures

James E.	09/12/2005
Lankford	09/12/2003

<u>**</u>Signature of Reporting Person

Explanation of Responses:

* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

Date

- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- One-fifth of the shares covered by the grant vest and are exercisable on 9/8/2006, 9/8/2007, 9/8/2008, 9/8/2009 and 9/8/2010, (1) respectively. No option may be exercised prior to 9/8/2006. Options will expire on 9/7/2012.

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.