Edgar Filing: SOLECTRON CORP - Form 4

SOLECTRO	N CORP											
Form 4												
April 05, 200)7											
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL			
UNITED STATES SECURITIES AND EXCHANGE COMMISSION							ONID	3235-0287				
Check thi	is hox		Was	shington,	, D.C. 205	549			Number:			
	if no longer						Expires:	January 31, 2005				
subject to	SIAI	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP C						NERSHIP OF	Estimated average			
Section 1		SECURITIES							burden hours per			
Form 4 or Form 5		Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,							response	0.5		
obligation	• •						-					
may cont	Section 1			•	•	- ·		f 1935 or Sectio	n			
See Instru	iction	30(n)) of the In	vestment	Compan	y Aci	OI 194	40				
1(b).												
(Print or Type F	Responses)											
	•											
1. Name and Address of Reporting Person [*] _ 2. Issuer Name and Ticker or Trading 5. Relationship of							Reporting Per	son(s) to				
CANNON MICHAEL R Symbol SOLECTRON				C				Issuer				
				TRON C	ORP [SL	R]		(Check all applicable)				
(Last)	(First)	(First) (Middle) 3. Date of Earliest Transaction					(Cnec	ск ан аррисави	e)			
				/Day/Year)				Director 10% Owner				
				4/05/2007				$_$ Officer (give title $_X_$ Other (specify				
								below) Former CF	below) EO,President,D	irector		
	(Streat)		4 16 4	- Jan and D								
			nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)					
			THEU(MOI	iiii/Day/1eai	.)			_X_ Form filed by (One Reporting Pe	erson		
MILPITAS,	CA 95035							Form filed by M				
								Person				
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative S	Securi	ties Aco	quired, Disposed of	f, or Beneficial	lly Owned		
1.Title of	2. Transaction I	Date 2A. Dee	emed	3.	4. Securi	ties A	cquired	5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Ye		on Date, if Transaction(A) or Disposed of				d of	Securities	Form: Direct			
(Instr. 3)		any (Month	Code (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)				5)	Beneficially Owned		Beneficial Ownership		
		(Ivioliui)	(Instr. 8) (Instr. 3, 4 and 5)				Following	(Instr. 4)	(Instr. 4)			
						(1)		Reported	~ /	. ,		
						(A) or		Transaction(s)				
				Code V	Amount		Price	(Instr. 3 and 4)				
Common	04/05/2007			S	277	D	\$	2,280,203	D			
Stock	0110012001			0	211	D	3.11	2,200,205	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)

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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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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							
reporting o when runne / runne /	Director	10% Owner	Officer	Other				
CANNON MICHAEL R 847 GIBRALTAR DRIVE MILPITAS, CA 95035				Former CEO,President,Director				
Signatures								
By: Tim Chu For: Michael R. Cannon		04/05/2007						

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

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).

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.