

SANMINA CORP
Form 4
July 30, 2014

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
ANDERSON DAVID ROBERT

(Last) (First) (Middle)

2700 NORTH FIRST STREET

(Street)

SAN JOSE, CA 95134

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
SANMINA CORP [SANM]

3. Date of Earliest Transaction (Month/Day/Year)
07/28/2014

4. If Amendment, Date Original Filed (Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

___ Director ___ 10% Owner
X Officer (give title below) ___ Other (specify below)

SVP & Corp Controller

6. Individual or Joint/Group Filing (Check Applicable Line)
X Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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)			
				(A) or (D)	Price					
				Code	V	Amount				
Common Stock	07/28/2014		M		2,500	A	\$ 11.23	33,121	D	
Common Stock	07/28/2014		S		2,500	D	\$ 23.7557	30,621	D	
Common Stock	07/28/2014		M		4,375	A	\$ 8.7	34,996	D	
Common Stock	07/28/2014		S		4,375	D	\$ 23.7557	30,621	D	

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

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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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares
Non-qualified stock option (right to buy)	\$ 11.23	07/28/2014		M	2,500	(2) 11/15/2020	Common Stock	2,500
Non-qualified stock option (right to buy)	\$ 8.7	07/28/2014		M	4,375	(3) 11/15/2021	Common Stock	4,375

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ANDERSON DAVID ROBERT 2700 NORTH FIRST STREET SAN JOSE, CA 95134			SVP & Corp Controller	

Signatures

/s/ Christopher K. Sadeghian,
Attorney-in-Fact
07/30/2014

**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).
- (1) THE SALE PRICE REPORTED IN COLUMN 4 OF TABLE 1 REPRESENTS THE WEIGHTED AVERAGE SALE PRICE OF SHARES SOLD RANGING FROM \$23.75 TO \$23.757 PER SHARE. UPON REQUEST BY THE COMMISSION STAFF, THE ISSUER, OR SECURITY HOLDER OF THE ISSUER, THE REPORTING PERSON WILL PROVIDE FULL INFORMATION REGARDING THE NUMBER OF SHARES SOLD AT EACH SEPARATE PRICE.

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- (2) THE NON-QUALIFIED STOCK OPTION VESTS IN A 4-YEAR VESTING SCHEDULE. 25% VESTED ON NOVEMBER 15, 2011 AND 1/36TH OF THE REMAINING OPTION VESTED EACH MONTH THEREAFTER.
- (3) THE NON-QUALIFIED STOCK OPTION VESTS IN A 4-YEAR VESTING SCHEDULE. 25% VESTED ON NOVEMBER 15, 2012 AND 1/36TH OF THE REMAINING OPTION VESTED EACH MONTH THEREAFTER.

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.