## Edgar Filing: SYNNEX CORP - Form 4

SYNNEX CORP

Form 4											
	COMMISSION						OMB APPROVAL				
	SECURITIES AND EXCHANGE C Washington, D.C. 20549					COMMISSION	OMB Number:	3235-0287			
Check this if no longe subject to Section 16 Form 4 or	er <b>STATEN</b>	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							burden hou	Expires:January 31 200Estimated average burden hours per response0.	
Form 5 obligation may contin <i>See</i> Instruct 1(b).	s Section 17(a	a) of the		lity Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40			
(Print or Type R	esponses)										
1. Name and Address of Reporting Person <u>*</u> LAROCQUE PETER			2. Issuer Name <b>and</b> Ticker or Trading Symbol SYNNEX CORP [SNX]					5. Relationship of Reporting Person(s) to Issuer			
								(Check all applicable)			
(Last) (First) (Middle) 44201 NOBEL DRIVE (Street)			<ol> <li>3. Date of Earliest Transaction (Month/Day/Year) 10/18/2006</li> <li>4. If Amendment, Date Original</li> </ol>					Director 10% Owner X Officer (give title Other (specify below) below) President, U.S. Distribution			
								6. Individual or Joint/Group Filing(Check			
FREMONT,	CA 94538		Filed(Mont	h/Day/Year)				Applicable Line) _X_ Form filed by 0 Form filed by N Person	One Reporting Pe More than One Re		
(City)	(State)	(Zip)	Table	I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)	Execution any	emed on Date, if 'Day/Year)	3. Transactic Code (Instr. 8)	4. Securi onAcquired Disposed (Instr. 3, Amount	l (A) o l 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	10/18/2006			A <u>(1)</u>	8,333	A	<u>(1)</u>	8,333	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. Transactio Code (Instr. 8)	5. Number of orDerivative 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)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 23.13	10/18/2006		A	25,000	(2)	10/18/2016	Common Stock	25,000

## **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
LAROCQUE PETER 44201 NOBEL DRIVE FREMONT, CA 94538			President, U.S. Distribution				
Signatures							
/s/ Simon Y. Leung,		10/20/200	)6				

Attorney-In-Fact

\*\*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) Represents shares of restricted stock awarded under the 2003 Stock Incentive Plan. The restricted stock vests as to 20% of the shares on each of the first five anniversaries of the date of grant.
- (2) This stock option vests as to 20% of the shares on the first anniversary of the date of grant and vests as to 1/60th of the shares monthly 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.