Edgar Filing: Mackenzie Jeffrey Eric - Form 4

Mackenzie Jo	effrey Eric										
Form 4	010										
January 31, 2	_										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION							OMB APPROVAL				
	UIIILL			shington,					OMB Number:	3235-0287	
Check this box if no longer				NGES IN BENEFICIAL OWNERSHIP OF SECURITIES				NERSHIP OF	Expires: January 31 2005 Estimated average burden hours per		
Form 4 or									response 0.		
Form 5 obligation may cont <i>See</i> Instru 1(b).	ns Section 17	(a) of the	Public U		ding Con	ipany	Act of	e Act of 1934, 1935 or Section 0			
(Print or Type F	Responses)										
1. Name and Address of Reporting Person _2. IssuerMackenzie Jeffrey EricSymbol				uer Name and Ticker or Trading bl			5. Relationship of Reporting Person(s) to Issuer				
				SON MANUFACTURING CO CA/ [NYSE:SSD]				(Check all applicable)			
(Last) 5956 W. LA	(First)	(Middle)	3. Date of (Month/E 01/30/2	-	ransaction			Director X Officer (give below) 		Owner r (specify	
(Street) 4. If Ame			endment, Date Original				6. Individual or Joint/Group Filing(Check				
ρι γαραγι	FON, CA 94588	2	Filed(Mor	nth/Day/Year	r)			Applicable Line) _X_ Form filed by O Form filed by M			
ILLASAN	1011, CA)+500	,						Person			
(City)	(State)	(Zip)	Tabl	e I - Non-I	Derivative	Securi	ties Acq	uired, Disposed of,	or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Year	 Execution any 		3. Transactio Code (Instr. 8) Code V	4. Securit on(A) or Dia (Instr. 3, 4)	sposed	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	01/30/2012			A	11,440 (<u>1)</u>	A	\$ 33.23	13,735	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)

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. of 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)		8. D S (I
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Options on Common Stock	\$ 40.72					02/26/2006(2)	01/25/2013	Common Stock	4,000	
Options on Common Stock	\$ 29.66					02/03/2012 <u>(3)</u>	02/03/2018	Common Stock	40,000	

Reporting Owners

Reporting Owner Name / Add	ress	Relationships							
	Director	10% Owner	Officer	Other					
Mackenzie Jeffrey Eric 5956 W. LAS POSITAS BL PLEASANTON, CA 94588	VD.		Vice President						
Signatures									
Jeffrey E. Mackenzie 0	01/30/2012								

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).
- (1) Restricted stock unit awards vest one fourth on each of the transaction date and the first, second and third anniversaries of the transaction date.
- (2) This date represents the date of the first monthly vesting period. This option vests equally over 48 months beginning with the date of grant.
- (3) This date represents the date of the first annual vesting period. This option vests equally over four years beginning with the date of grant.

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 Owners

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