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Schiff Carri Form 4	e										
March 24, 2	_								OMB AI	PPROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or				GES IN I SECUR	BENEFI ITIES	CIA			Expires: January 3 200 Estimated average burden hours per response 0.		
obligatio may con <i>See</i> Instr 1(b).	ons Section 17(a) of the P	ublic Ut		ling Com	pany	Act of	e Act of 1934, E 1935 or Section 40	1		
(Print or Type	Responses)										
]			2. Issuer Name and Ticker or Trading Symbol FLEXTRONICS INTERNATIONAL LTD. [FLEX]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
	. , , ,		3. Date of (Month/D 03/23/20	-	ansaction			Director X Officer (give below) Senior VP :			
	(Street)	(Street) 4. If Amendment, Date Original Filed(Month/Day/Year)						 6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting 			
SAN JOSE	, CA 95131							Person	lore than One Re	eporting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative S	Securi	ties Acq	uired, Disposed of	, or Beneficial	lly Owned	
1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)		Date, if	Code (Instr. 3, 4 and 5)) (Instr. 8) (A) or			of (D)	Securities Beneficially	6. Ownership 7. Nature of Form: Direct Indirect (D) or Beneficial Indirect (I) Ownership (Instr. 4) (Instr. 4)			
Ordinary Shares	03/23/2010			Code V M	Amount 75,000	(D) A	Price \$ 2.26		D		
Ordinary Shares	03/23/2010			S <u>(1)</u>	75,000	D	\$ 8.01	97,500	D		
Ordinary Shares	03/23/2010			М	4,167	A	\$ 5.88	101,677	D		
Ordinary Shares	03/23/2010			S <u>(1)</u>	4,167	D	\$ 8.01	97,500 <u>(2)</u>	D		

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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. 5. Number of Transactio/Derivative Code Securities (Instr. 8) 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 1 5 (
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Stock Option (right to buy)	\$ 2.26	03/23/2010		М	75,000	(3)	12/05/2015	Ordinary Shares	75,000	
Stock Option (right to buy)	\$ 5.88	03/23/2010		М	4,167	(4)	07/01/2012	Ordinary Shares	4,167	

Reporting Owners

Reporting Owner Name / Address		Relationships						
		Director	10% Owner	Officer	Other			
Schiff Carrie C/O FLEXTRONICS INTERNATIONAL USA, INC. 2090 FORTUNE DRIVE SAN JOSE, CA 95131				Senior VP and General Counsel				
Signatures								
/s/ Carrie Schiff	03/24/2010							
<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).
- (1) The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.

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Includes the following: (1) 20,000 unvested shares of a share bonus award (a contingent right to receive Ordinary Shares), which vest in (2) two equal annual installments beginning on April 13, 2010, (2) 30,000 unvested shares of share bonus award, which vest in three equal

- annual installments beginning on May 1, 2010, and (3) 37,500 unvested shares of a share bonus award, which will vest on May 1, 2010.
- (3) The options vest and become exercisable in four equal installments beginning June 2, 2009 and 25% annually thereafter.
- (4) The options began vesting on July 1, 2003 and are now fully exercisable.

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.