Edgar Filing: FIEGER JAMES M - Form 4

FIEGER JAN	MES M										
Form 4											
July 05, 2005	5										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								OMB AF	PROVAL		
	CURINI 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549						OMMISSION	OMB Number:	3235-0287		
Check this box									Expires:	January 31,	
if no longer STATEMENT OF CHANG				GES IN	GES IN BENEFICIAL OWNERSHIP				2005		
	subject to Strate when the strate of the str							Estimated average burden hours per			
Form 4 o	r							response 0.5			
Form 5	Filed pu	rsuant to S	Section 1	6(a) of the	e Securitie	s Exc	change	e Act of 1934,	•		
obligation		(a) of the	Public U	tility Hold	ling Comp	any A	Act of	1935 or Section	n		
may cont See Instru		30(h)	of the In	vestment	Company	Act o	of 194	0			
1(b).											
(Print or Type F	Responses)										
	ddress of Reporting	g Person [*]	2. Issuer	r Name and	Ticker or Trading 5. Relationship of			Reporting Pers	son(s) to		
FIEGER JA	MES M		Symbol	Symbol				Issuer			
	3COM	3COM CORP [COMS]				(Check all applicable)					
(Last)	(First)	(Middle)	3. Date of	f Earliest Tr	ansaction			(Chee	k an applicable)	
			(Month/E	Month/Day/Year)				Director	10%	Owner	
			07/01/2005					XOfficer (give titleOther (specify below)			
								below) Sr VP V	Vorld Wide Sal	es	
	(Street)		4 TE A	u dur ou t Da							
				4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check			
Filed				led(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
MARIBOR	OUGH, MA 01	752-3064						Form filed by M			
MINLDON		152 5004						Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative Se	ecuriti	es Acqu	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Da	te 2A. Deer	on Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5)					5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Year								Form: Direct Indirect (D) or Beneficial		
(Instr. 3)		any (Month/I						Beneficially			
		(Ivionun/I	Day/Year)	(Instr. 8)				Owned Following	Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
								Reported	((
						(A) or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	07/01/0005				160,000			274.000	D		
Stock	07/01/2005			А	(1)	А	\$0	274,000	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 Amou Underlying Secur (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am Nui Sha
Non-Qualified Stock Option (right to buy)	\$ 3.58	07/01/2005		А	250,000	(2)	07/01/2012	Common Stock	25

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
FIEGER JAMES M 350 CAMPUS DRIVE MARLBOROUGH, MA 01752-3064			Sr VP World Wide Sales			

Signatures

<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) Non-Derivative shares were awarded pursuant to 3Com Corporation's 2003 Stock Plan. These shares cannot be sold until vesting requirements have been met.
- (2) Shares granted become exercisable in equal installments over four years on the anniversary of the grant date.

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.