FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL						
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* MCGREGOR SCOTT A 2. Date of Event Requiring Statement (Month/Day/Year) 06/25/2010				3. Issuer Name and Ticker or Trading Symbol INGRAM MICRO INC [IM]								
(Last) (First) (Mid C/O INGRAM MICRO INC.	dle)			4. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner			5. If Amendment, Date of Original Filed (Month/Day/Year)					
1600 E. ST. ANDREW PLACE					Officer (give title below)	Other (spe	cify		dividual or Joint cable Line)	/Group Filing (Check		
(Street) SANTA ANA CA 927	05							X		y One Reporting Person y More than One erson		
(City) (State) (Zip)												
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)					nt of Securities ally Owned (Instr. 4)			4. Nature of Indirect Beneficial Ownership (Instr. 5)				
Class A Common Stock					0	D						
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
1. Title of Derivative Security (Instr. 4)		2. Date Exerc Expiration Da (Month/Day/)	ate		tle and Amount of Secur erlying Derivative Secur		4. Conve or Exe	rcise	5. Ownership Form: Direct (D)	6. Nature of Indirect Beneficial Ownership (Instr. 5)		

Explanation of Responses:

Lily Yan Arevalo for Scott A.

06/28/2010

<u>McGregor</u>

** Signature of Reporting Person

Date

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

- * If the form is filed by more than one reporting person, see Instruction 5 (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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.