FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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| OMB APPROVAL | | | | | | | | |
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| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average b | ourden | | | | | | | |
| hours per response. | 0.5 | | | | | | | |

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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* <u>HERNANDEZ EMMANUEL T</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol SUNPOWER CORP [SPWR] | | | | | | | | | tionship of Reporting Perso all applicable) Director | | Perso | 10% Ow | ner |
|--|---|--|---|---------|---|--|---------|--------|--|--|---|---|-----------------------------------|---|---|--|--|---|------------|
| (Last) 3939 NOR | (Firs | , | Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 05/26/2006 | | | | | | | | | Officer (give title Other (specify below) below) Chief Financial Officer | | | | респу |
| (Street) SAN JOSE (City) | E CA | | 5134 Zip) | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Indiv ne) X | Form filed by More than One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tab | le I - No | on-Deri | vative | e Se | curit | ies Ac | quired | , Di | sposed o | f, or Ber | neficia | lly (| Owned | | | | |
| Date | | | 2. Transa Date (Month/D | | Execution | | n Date, | | | es Acquired (A) or Of (D) (Instr. 3, 4 and 5) | | 5. Amount of Securities Beneficially Owned Following | | Form: | Direct Indirect I | 7. Nature of ndirect Beneficial Ownership | | | |
| | | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Reported Transaction (Instr. 3 au | tion(s) | | | (Instr. 4) |
| CLASS A COMMON STOCK 05/26/ | | | | /2006 | 2006 | | М | | 50,000 | A | \$3. | \$3.3 | | 50,000 | | D | | | |
| CLASS A COMMON STOCK 05/26 | | | 05/26 | /2006 | 2006 | | S | | 50,000 | D | \$33.0 | 981 | 0 | | | D | | | |
| | | 1 | Γable II | | | | | | | | posed of, convertil | | | y Oı | wned | | | | |
| 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. Transaction Code (Instr. 8) | | on of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | | 8. Price of Derivative Security (Instr. 5) | 9. Numbe derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4) | e s ally g | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership t (Instr. 4) | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | ble | Expiration Date | Title | Amou or Numb of Share | er | | | | | |
| EMPLOYEE STOCK OPTION (RIGHT TO | \$3.3 | 05/26/2006 | | | М | | | 50,000 | (1)(2) | | 04/25/2015 | CLASS A COMMON STOCK | | 00 | \$0 | 941,7 | 38 | D | |

Explanation of Responses:

- $1.\ The\ option\ became\ exercisable\ as\ to\ 1/36th\ of\ the\ shares\ on\ May\ 24,\ 2005\ and\ becomes\ exercisable\ as\ to\ 1/36th\ of\ the\ shares\ monthly\ thereafter.$
- 2. The sales reported on this Form 4 were effected pursuant to a previously adopted Rule 10b5-1 trading plan by the Reporting Person.

/s/ Emmanuel T Hernandez 05/26/2006

** 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 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).

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.