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AEHR TEST SYSTEMS Form SC 13G/A January 30, 2009

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UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549

^{4.} CITZENSHIP OR PLACE OF ORGANIZATION Madison, Wisconsin

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NUMBERS OF
SHARES
BENEFICIALLY
OWNED BY
EACH
REPORTING
PERSON
WITH

5. SOLE VOTING POWER
821,143

6. SHARED VOTING POWER
Not Applicable

7. SOLE DISPOSITIVE POWER
821,143

8. SHARED DISPOSITIVE POWER
Not Applicable

- 9. AGGREGATE AMOUNT BENEFICALLY OWNED BY EACH REPORTING PERSON 821,143
- 10. CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES * Not Applicable
- 11. PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW 9 9.77%
- 12. TYPE OF REPORTING PERSON *

 EP (Public Pension Fund)
 - * SEE INSTRUCTIONS BEFORE FILLING OUT!

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- ITEM 1. ISSUER
 - (a) Aehr Test Systems
 - (b) 400 Kato Terrace Fremont, CA 94539
- ITEM 2. PERSON FILING
 - (a) State of Wisconsin Investment Board
 - (b) P.O. Box 7842 Madison, WI 53707
 - (c) Wisconsin State Agency
 - (d) See cover page
 - (e) See cover page
- ITEM 3. THIS STATEMENT IS FILED PURSUANT TO 13d-1(b) or 13d-2(b) AND THE STATE OF WISCONSIN INVESTMENT BOARD IS A GOVERNMENT AGENCY WHICH MANAGES PUBLIC PENSION FUNDS SUBJECT TO PROVISIONS COMPARABLE TO ERISA.
- ITEM 4. OWNERSHIP
 - (a) See Row 9 on Page 2
 - (b) See Row 11 on Page 2
 - (c) The State of Wisconsin Investment Board retains sole voting and dispositive power for all shares.
- ITEM 5. IF THIS STATEMENT IS BEING FILED TO REPORT THE FACT THAT AS OF THE DATE HEREOF THE REPORTING PERSON HAS CEASED TO BE THE BENEFICIAL OWNER OF MORE THAN FIVE PERCENT OF THE CLASS OF SECURITIES, CHECK THE FOLLOWING _____.
- ITEM 6. NOT APPLICABLE

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ITEM 7. NOT APPLICABLE

ITEM 8. NOT APPLICABLE

ITEM 9. NOT APPLICABLE

ITEM 10. CERTIFICATION

By signing below I certify that, to the best of my knowledge and belief, the securities referred to above were acquired in the ordinary course of business and were not acquired for the purpose of and do not have the effect of changing or influencing the control of the issuer of such securities and were not acquired in connection with or as a participant in any transaction having such purpose or effect.

SIGNATURE

After reasonable inquiry to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct.

January 30, 2009
---Date

/s/ David Villa
----Signature