FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

washington, D.C. 20049
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

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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 Se	ectio	n 30(h) of the	e Investmer	nt Coi	mpany Act	of 194	40								
1. Name and Address of Reporting Person* <u>Kowalski David Adam</u>						2. Issuer Name and Ticker or Trading Symbol SPX CORP [SPW]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) (Middle) SPX SERVICE SOLUTIONS 40 OAK HOLLOW, SUITE 265					01/3	3. Date of Earliest Transaction (Month/Day/Year) 01/30/2007										X Officer (give title Other (specify below) Segment President					
(Street)					4. If A	Amer	ndmen	t, Date	e of Original	Filed	I (Month/D		Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person								
SOUTHFIELD MI 48034													Form filed by More than One Reporting Person								
(City) (State) (Zip)													1 (1901)								
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						E:	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr					d Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported		n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Alliount		(A) or (D)	Price	Transac (Instr. 3	Transaction(s) (Instr. 3 and 4)					
Common	Stock			01/30)/2007	_			F ⁽³⁾		810	4	D	\$69.	88 64,	,788(1)		D			
Common Stock																400			401(k) Plan		
Common Stock															4	409		I	ESPP		
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. Deeme Execution if any (Month/Da	Date,		5. Number 6. ransaction of E			Expiration	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code \	,	(A)	(D)	Date Exercisabl		xpiration ate	Title	or No of	umber							
Employee stock option to purchase common stock ⁽²⁾	\$46.5312								07/23/200	2 0	7/22/2009	Comi		5,000		6,000		D			
Employee stock option to purchase common stock ⁽²⁾	\$40.5								02/25/200	3 0	2/24/2010	Comi		,000		4,000		D			
Employee stock option to purchase common stock ⁽²⁾	\$48.44								01/02/2004	4 0	1/01/2011	Comi		4,000		14,000)	D			
Employee stock option to purchase common stock ⁽²⁾	\$69.43								01/02/200	5 0	1/01/2012	Comi		0,000		20,000)	D			
Employee stock option to purchase common stock ⁽²⁾	\$38.57								01/02/2000	6 0	1/01/2013	Comi Sto	mon 20	0,000		20,000)	D			

Explanation of Responses:

- 1. Includes unvested restricted stock units.
- 2. Granted under the SPX Corporation 2002 Stock Compensation Plan.
- 3. Shares delivered to the issuer for the payment of withholding taxes due upon the vesting of restricted stock units previously granted under the SPX Corporation 2002 Stock Compensation Plan.

Brian Webb, Attorney In Fact 02/01/2007 for David Kowalski

** 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.