

Lessner Philip Michael
 Form 3
 October 30, 2008

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0104
 Expires: January 31, 2005
 Estimated average burden hours per response... 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

<p>1. Name and Address of Reporting Person *</p> <p>Â Lessner Philip Michael</p> <p>(Last) (First) (Middle)</p> <p>KEMET CORPORATION,Â 2835 KEMET WAY</p> <p>(Street)</p> <p>GREENVILLE,Â SCÂ 29681</p> <p>(City) (State) (Zip)</p>	<p>2. Date of Event Requiring Statement</p> <p>(Month/Day/Year)</p> <p>10/22/2008</p>	<p>3. Issuer Name and Ticker or Trading Symbol</p> <p>KEMET CORP [KEM]</p>	<p>4. Relationship of Reporting Person(s) to Issuer</p> <p>(Check all applicable)</p> <p><input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) VP-Chief Technical Officer</p>	<p>5. If Amendment, Date Original Filed(Month/Day/Year)</p>	<p>6. Individual or Joint/Group Filing(Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person</p>
---	---	--	---	---	--

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	4,111	D	Â

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

SEC 1473 (7-02)

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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative	5. Ownership Form of Derivative Security:	6. Nature of Indirect Beneficial Ownership (Instr. 5)
---	---	--	---	---	--

Edgar Filing: Lessner Philip Michael - Form 3

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Employee Stock Option	02/01/2001	10/28/2008	Common Stock	1,320	\$ 5.7345	D	Â
Employee Stock Option	10/20/2001	10/20/2009	Common Stock	2,500	\$ 14.5	D	Â
Employee Stock Option	11/30/2002	11/30/2010	Common Stock	2,500	\$ 17.5	D	Â
Employee Stock Option	11/21/2003	11/21/2011	Common Stock	3,750	\$ 16.53	D	Â
Employee Stock Option	11/15/2004	11/15/2012	Common Stock	10,000	\$ 9.03	D	Â
Employee Stock Option	10/24/2005	10/24/2013	Common Stock	15,000	\$ 12.77	D	Â
Employee Stock Option	10/29/2006	10/29/2014	Common Stock	10,000	\$ 7.76	D	Â
Employee Stock Option	10/24/2007	10/24/2015	Common Stock	10,000	\$ 7.25	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Lessner Philip Michael KEMET CORPORATION 2835 KEMET WAY GREENVILLE, SC 29681	Â	Â	Â VP-Chief Technical Officer	Â

Signatures

/s/ Dr. Philip M.
Lessner

10/30/2008

**Signature of Reporting Person Date

Explanation of Responses:

* 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. 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.