FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPRO	DVAL				
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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 Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Riley David							2. Issuer Name and Ticker or Trading Symbol ModusLink Global Solutions Inc [MLNK]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify					
(Last) (First) (Middle) C/O MODUSLINK GLOBAL SOLUTIONS, INC.							3. Date of Earliest Transaction (Month/Day/Year) 10/02/2009									X Officer (give title Other (sp. below) Exec VP, Corp. Develop.					
1100 WINTER STREET, SUITE 4600							4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street) WALTHAM MA 02451					_ -	4. II Alliendinent, Date of Original Filed (World#Day/Teal)									Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City) (State) (Zip)															1 0.0011						
		Tal	ole I - No	n-Deri	vativ	re Se	ecuritie	s Ac	quired,	Dis	posed o	f, or E	ene	ficially	Owned						
Date				Date	Transaction te onth/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year		Code (Instr.		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4				Beneficia Owned F	es ally Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership		
		Code	v	Amount					(A (D) or)	Price	Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)					
Common Stock 10/02/							/2009		A		20,000	(1)	A	\$ <mark>0</mark>	46,178			D			
Common Stock 10/02/					2/200	/2009		F		1,059(2	2)	D	\$7.25	46,	,178		D				
			Table II -								osed of, onvertib				Owned						
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)				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 Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)		
					Code	v	(A)		Date Exercisabl		Expiration Date	Title	O N O	Amount or Number of Shares							
Stock Option (right to	\$7.25	10/02/2009			A		10,000		10/02/2010	(3)	10/02/2016	Comm Stock		0,000	\$0	10,00	0	D			

Explanation of Responses:

- 1. Restrictions lapse with respect to 33 1/3% of the shares covered thereby on each of the first three anniversaries of the date of grant, provided the reporting person remains employed by ModusLink Global Solutions or a subsidiary of ModusLink Global Solutions on such anniversary date.
- 2. Payment of tax liability by delivering securities incident to the vesting of shares of restricted stock on October 2, 2009 in accordance with Rule 16b-3 and a pre-existing 10b5-1 Sales Plan established by the reporting person on October 13, 2008.
- 3. Option vests and becomes exercisable as to 25% on the first anniversary of the date of grant and the remainder in 36 equal monthly installments.

/s/ Thomas B. Rosedale (Pursuant to Power of Attorney)

10/06/2009

** 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.