Claymore/Guggenheim Strategic Opportunities Fund Form 4

November 19, 2007

Check this box

if no longer

subject to

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB Number:

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Section 16. Form 4 or Form 5 obligations may continue.

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

1(b).

(Print or Type Responses)

(State)

(Zip)

See Instruction

1. Name and Address of Reporting Person * 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Minerd B. Scott Issuer Symbol Claymore/Guggenheim Strategic (Check all applicable) Opportunities Fund [GOF] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner Officer (give title __X_ Other (specify (Month/Day/Year) below) below) 2455 CORPORATE WEST DRIVE 11/19/2007 Chief Investment Officer (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting LISLE, IL 60532 Person (City)

(= 1)	Table 1 - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
2. Transaction Date	2A. Deemed	3.	4. Securi	ities A	cquired	5. Amount of	6. Ownership	7. Nature of		
(Month/Day/Year)	Execution Date, if	Transactio	on(A) or D	ispose	d of (D)	Securities	Form: Direct	Indirect		
	any	Code (Instr. 3, 4 and 5)			Beneficially	(D) or	Beneficial			
	(Month/Day/Year)	(Instr. 8)				Owned	Indirect (I)	Ownership		
						Following	(Instr. 4)	(Instr. 4)		
				()		Reported				
						Transaction(s)				
		Code V	Amount		Price	(Instr. 3 and 4)				
11/19/2007		Р	5,000	A	\$ 16.35	25,000	D			
	2. Transaction Date (Month/Day/Year)	2. Transaction Date (Month/Day/Year) 2. Transaction Date 2A. Deemed Execution Date, if any (Month/Day/Year)	2. Transaction Date 2A. Deemed 3. (Month/Day/Year) Execution Date, if any Code (Month/Day/Year) (Instr. 8) Code V	2. Transaction Date 2A. Deemed 3. 4. Securion Date, if any Code (Instr. 3, (Month/Day/Year)) (Month/Day/Year) (Instr. 8) Code V Amount	2. Transaction Date (Month/Day/Year)	2. Transaction Date (Month/Day/Year)	2. Transaction Date 2A. Deemed 3. 4. Securities Acquired 5. Amount of (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Instr. 8) Code (Instr. 3, 4 and 5) Energicially Owned Following Reported Transaction(s) (Instr. 3 and 4)	2. Transaction Date (Month/Day/Year)		

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

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Table I. Non Dominative Committee Acquired Disposed of an Domeficially On

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr	
					4, and 5)	Date	Expiration		Amount		
				Code V	(A) (D)	Exercisable	Date	Title	Number of Shares		

Reporting Owners

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Minerd B. Scott 2455 CORPORATE WEST DRIVE LISLE, IL 60532

Chief Investment Officer

Signatures

/s/ B. Scott Minerd by Nicholas Dalmaso Pursuant to Power of Attorney

11/19/2007

**Signature of Reporting Person

Date

Explanation of Responses:

- * 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. 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.

Reporting Owners 2