RCM TECHNOLOGIES INC Form SC 13D/A October 28, 2013

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

SCHEDULE 13D (Rule 13d-101)

INFORMATION TO BE INCLUDED IN STATEMENTS FILED PURSUANT TO § 240.13d-1(a) AND AMENDMENTS THERETO FILED PURSUANT TO § 240.13d-2(a)

(Amendment No. 7)1

RCM Technologies, Inc. (Name of Issuer)

Common Stock, par value \$0.05 per share (Title of Class of Securities)

749360400 (CUSIP Number)

Bradley Vizi 1247 Stoner Avenue, #207 Los Angeles, California 90025 (330) 519-1158

With copies to:

Steve Wolosky, Esq.
Olshan Frome Wolosky LLP
Park Avenue Tower
65 East 55th Street
New York, New York 10022
(212) 451-2300

(Name, Address and Telephone Number of Person Authorized to Receive Notices and Communications)

October 25, 2013 (Date of Event Which Requires Filing of This Statement)

If the filing person has previously filed a statement on Schedule 13G to report the acquisition that is the subject of this Schedule 13D, and is filing this schedule because of §§ 240.13d-1(e), 240.13d-1(f) or 240.13d-1(g), check the following box o.

Note: Schedules filed in paper format shall include a signed original and five copies of the schedule, including all exhibits. See § 240.13d-7 for other parties to whom copies are to be sent.

| 1        | The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with |
|----------|--|
| respect  | to the subject class of securities, and for any subsequent amendment containing information which would alter  |
| disclosu | res provided in a prior cover page.  |

The information required on the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

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| 1                                | NAME OF REPORTING PERSON  |                                      |    |  |  |
|----------------------------------|---|--------------------------------------|----|--|--|
| 2 3                              | IRS Partners No. 19, L.P.<br>CHECK THE APPROPRIATE I<br>GROUP<br>SEC USE ONLY   | (a) ý<br>(b) "                       |    |  |  |
| 4                                | SOURCE OF FUNDS   |                                      |    |  |  |
| 5<br>6                           | WC CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e) CITIZENSHIP OR PLACE OF ORGANIZATION        |                                      |    |  |  |
| NUMBER OF<br>SHARES              | Delaware 7  | SOLE VOTING POWER                    |    |  |  |
| BENEFICIALLY<br>OWNED BY<br>EACH | 8   | 0<br>SHARED VOTING POWER             |    |  |  |
| REPORTING<br>PERSON WITH         | 9   | 1,353,775*<br>SOLE DISPOSITIVE POWER |    |  |  |
|                                  | 10  | 0<br>SHARED DISPOSITIVE POW          | ER |  |  |
| 11                               | 1,353,775* AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON   |                                      |    |  |  |
| 12<br>13                         | 1,353,775* CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) " EXCLUDES CERTAIN SHARES PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11) |                                      |    |  |  |
| 14                               | 10.9%* TYPE OF REPORTING PERSON   |                                      |    |  |  |
|                                  | PN  |                                      |    |  |  |
| * See Item 5                     |   |                                      |    |  |  |
| 2                                |   |                                      |    |  |  |

| 1                        | NAME OF REPORTING PERSON   |  |                       |  |  |
|--------------------------|--|--|-----------------------|--|--|
| 2                        | The Leonetti/O'Connell<br>CHECK THE APPROP<br>GROUP<br>SEC USE ONLY  | (a) ý<br>(b) "                         |                       |  |  |
|                          |  |  |                       |  |  |
| 4                        | SOURCE OF FUNDS  |  |                       |  |  |
| 5<br>6                   | WC CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS " IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e) CITIZENSHIP OR PLACE OF ORGANIZATION |  |                       |  |  |
|                          | Delaware   |  |                       |  |  |
| NUMBER OF<br>SHARES      | 7  | SOLE VOTING POWER                      |                       |  |  |
| BENEFICIALLY             |  | 0                                      |                       |  |  |
| OWNED BY<br>EACH         | 8  | SHARED VOTING POWE                     | ER                    |  |  |
| REPORTING<br>PERSON WITH | 9  | 266,074*<br>SOLE DISPOSITIVE POV       | VER                   |  |  |
|                          | 10   | 0<br>SHARED DISPOSITIVE F              | POWER                 |  |  |
| 11                       | AGGREGATE AMOU   | 266,074*<br>NT BENEFICIALLY OWNED BY I | EACH REPORTING PERSON |  |  |
|                          | 266,074*   |  |                       |  |  |
| 12                       | CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) "  |  |                       |  |  |
| 13                       | EXCLUDES CERTAIN SHARES PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)   |  |                       |  |  |
| 14                       | 2.2%* TYPE OF REPORTING PERSON   |  |                       |  |  |
|                          | СО   |  |                       |  |  |
| * See Item 5             |  |  |                       |  |  |
| 3                        |  |  |                       |  |  |

| 1                                | NAME OF REPORTING PERSON   |                                       |            |                |
|----------------------------------|--|---------------------------------------|------------|----------------|
| 2                                | M2O, Inc.<br>CHECK THE AP<br>MEMBER OF A<br>SEC USE ONLY   |                                       | (a)<br>(b) | ý<br>          |
| 4                                | SOURCE OF FU   | NDS                                   |            |                |
| 5                                | AF<br>CHECK BOX IF DISCLOSURE OF LEGAL<br>PROCEEDINGS IS REQUIRED PURSUANT TO<br>ITEM 2(d) OR 2(e) |                                       |            |                |
| 6                                | CITIZENSHIP O  | R PLACE OF ORGANIZATION               |            |                |
| NUMBER OF<br>SHARES              | California 7   | SOLE VOTING POWER                     |            |                |
| BENEFICIALLY<br>OWNED BY<br>EACH | 8  | 0<br>SHARED VOTING POWER              |            |                |
| REPORTING<br>PERSON WITH         |  | 1,353,775*<br>SOLE DISPOSITIVE POWER  |            |                |
|                                  |  | 0<br>SHARED DISPOSITIVE POWER         |            |                |
| 11                               |  | 1,353,775*<br>MOUNT BENEFICIALLY OWNE | ED BY      | EACH REPORTING |
| 12                               | 1,353,775* CHECK BOX IF THE AGGREGATE AMOUNT IN " ROW (11) EXCLUDES CERTAIN SHARES                 |                                       |            |                |
| 13                               | PERCENT OF C   | LASS REPRESENTED BY AMOU              | JNT IN     | N ROW (11)     |
| 14                               | 10.9%* TYPE OF REPORTING PERSON  |                                       |            |                |
|                                  | CO, HC   |                                       |            |                |
| * See Item 5                     |  |                                       |            |                |
| 4                                |  |                                       |            |                |

| 1                                | NAME OF REPORTING PERSON  |  |  |  |  |  |
|----------------------------------|---|--|--|--|--|--|
| 2                                | The Michael F. O'Connell and Margo L. O'Connell Revocable Trust CHECK THE APPROPRIATE BOX IF A MEMBER OF A (a) ý GROUP (b) " SEC USE ONLY |  |  |  |  |  |
| 4                                | SOURCE OF FUNDS   |  |  |  |  |  |
| 5<br>6                           | AF CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS " IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e) CITIZENSHIP OR PLACE OF ORGANIZATION          |  |  |  |  |  |
| NUMBER OF<br>SHARES              | Not Applicable 7  | SOLE VOTING POWER                                      |  |  |  |  |
| BENEFICIALLY<br>OWNED BY<br>EACH | 8   | 0<br>SHARED VOTING POWER                               |  |  |  |  |
| REPORTING<br>PERSON WITH         | 9   | 1,353,775*<br>SOLE DISPOSITIVE POWER                   |  |  |  |  |
|                                  | 10  | 0<br>SHARED DISPOSITIVE POWER                          |  |  |  |  |
| 11                               | AGGREGATE AMOUNT BEN  | 1,353,775*<br>EFICIALLY OWNED BY EACH REPORTING PERSON |  |  |  |  |
| 12<br>13                         | 1,353,775* CHECK BOX IF THE AGGREGATE AMOUNT IN ROW (11) " EXCLUDES CERTAIN SHARES PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)     |  |  |  |  |  |
| 14                               | 10.9%* TYPE OF REPORTING PERSON   |  |  |  |  |  |
|                                  | OO, HC  |  |  |  |  |  |
| * See Item 5                     |   |  |  |  |  |  |
| 5                                |   |  |  |  |  |  |

| 1                                | NAME OF REPORTING PERSON  |                                       |            |                |  |  |
|----------------------------------|---|---------------------------------------|------------|----------------|--|--|
| 2                                | Michael O'Conne<br>CHECK THE AF<br>MEMBER OF A<br>SEC USE ONLY  | PPROPRIATE BOX IF A<br>GROUP          | (a)<br>(b) | ý<br>          |  |  |
| 4                                | SOURCE OF FU  | SOURCE OF FUNDS                       |            |                |  |  |
| 5                                | AF CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e) CITIZENSHIP OR PLACE OF ORGANIZATION        |                                       |            |                |  |  |
| NUMBER OF<br>SHARES              | United States 7   | SOLE VOTING POWER                     |            |                |  |  |
| BENEFICIALLY<br>OWNED BY<br>EACH | 8   | 0<br>SHARED VOTING POWER              |            |                |  |  |
| REPORTING<br>PERSON WITH         | 9   | 1,619,849*<br>SOLE DISPOSITIVE POWER  |            |                |  |  |
|                                  | 10  | 0<br>SHARED DISPOSITIVE POWER         |            |                |  |  |
| 11                               | AGGREGATE A<br>PERSON   | 1,619,849*<br>MOUNT BENEFICIALLY OWNE | ED BY      | EACH REPORTING |  |  |
| 12<br>13                         | 1,619,849* CHECK BOX IF THE AGGREGATE AMOUNT IN " ROW (11) EXCLUDES CERTAIN SHARES PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11) |                                       |            |                |  |  |
| 14                               | 13.1%* TYPE OF REPORTING PERSON   |                                       |            |                |  |  |
|                                  | IN  |                                       |            |                |  |  |
| * See Item 5                     |   |                                       |            |                |  |  |

| 1                                | NAME OF REPO  | ORTING PERSON                                 |            |                |  |
|----------------------------------|---|---|------------|----------------|--|
| 2                                |   | Asset Management LLC PROPRIATE BOX IF A GROUP | (a)<br>(b) | ý<br>          |  |
| 3                                | SEC USE ONLY  |   | (0)        |                |  |
| 4                                | SOURCE OF FU  | NDS   |            |                |  |
| 5                                | OO CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e) |   |            |                |  |
| 6                                | CITIZENSHIPO  | R PLACE OF ORGANIZATION                       |            |                |  |
| NUMBER OF<br>SHARES              | Delaware 7  | SOLE VOTING POWER                             |            |                |  |
| BENEFICIALLY<br>OWNED BY<br>EACH | 8   | 0<br>SHARED VOTING POWER                      |            |                |  |
| REPORTING<br>PERSON WITH         | 9   | 0<br>SOLE DISPOSITIVE POWER                   |            |                |  |
|                                  | 10  | 0<br>SHARED DISPOSITIVE POWER                 |            |                |  |
| 11                               | AGGREGATE A<br>PERSON   | 1,619,849*<br>MOUNT BENEFICIALLY OWNE         | ED BY      | EACH REPORTING |  |
| 12                               | 1,619,849*<br>CHECK BOX IF THE AGGREGATE AMOUNT IN "                                      |   |            |                |  |
| 13                               | ROW (11) EXCLUDES CERTAIN SHARES PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (11)       |   |            |                |  |
| 14                               | 13.1%* TYPE OF REPORTING PERSON   |   |            |                |  |
|                                  | IA  |   |            |                |  |
| * See Item 5                     |   |   |            |                |  |
|                                  |   |   |            |                |  |

| 1  | NAME OF REPORTING PERSON   |                                       |        |                |  |  |
|--|--|---------------------------------------|--------|----------------|--|--|
| 2  | Bradley Vizi<br>CHECK THE APPROPRIATE BOX IF A<br>MEMBER OF A GROUP<br>SEC USE ONLY  |                                       |        | ý<br>          |  |  |
| 4  | SOURCE OF FU   | SOURCE OF FUNDS                       |        |                |  |  |
| 5  | PF, OO CHECK BOX IF DISCLOSURE OF LEGAL PROCEEDINGS IS REQUIRED PURSUANT TO ITEM 2(d) OR 2(e) CITIZENSHIP OR PLACE OF ORGANIZATION |                                       |        |                |  |  |
|  | United States  |                                       |        |                |  |  |
| NUMBER OF                                  | 7  | SOLE VOTING POWER                     |        |                |  |  |
| SHARES<br>BENEFICIALLY<br>OWNED BY<br>EACH | 8  | 1,000<br>SHARED VOTING POWER          |        |                |  |  |
| REPORTING<br>PERSON WITH                   | 9  | 0<br>SOLE DISPOSITIVE POWER           |        |                |  |  |
|  | 10   | 1,000<br>SHARED DISPOSITIVE POWER     |        |                |  |  |
| 11   | AGGREGATE A<br>PERSON  | 1,619,849*<br>MOUNT BENEFICIALLY OWNE | ED BY  | EACH REPORTING |  |  |
| 12   | 1,620,849* CHECK BOX IF THE AGGREGATE AMOUNT IN" ROW (11) EXCLUDES CERTAIN SHARES  |                                       |        |                |  |  |
| 13   | PERCENT OF C   | LASS REPRESENTED BY AMOU              | JNT II | N ROW (11)     |  |  |
| 14   | 13.1%* TYPE OF REPORTING PERSON  |                                       |        |                |  |  |
|  | IN   |                                       |        |                |  |  |
| * See Item 5                               |  |                                       |        |                |  |  |

| 1 | NAME OF REPORTING PERSON              |     |    |
|---|---------------------------------------|-----|----|
|   | Christopher Kiper                     |     |    |
| 2 | CHECK THE APPROPRIATE BOX IF A MEMBER | (a) | ý  |
|   | OF A GROUP                            | (b) | •• |
| 3 | SEC USE ONLY                          |     |    |
| 4 | SOURCE OF FUNDS                       |     |    |
|   | PF, OO                                |     |    |
| 5 | CHECK BOX IF DISCLOSURE OF LEGAL      | ••  |    |
|   | PROCEEDINGS IS REQUIRED PURSUANT TO   |     |    |
|   | ITEM 2(d) OR 2(e)                     |     |    |
| 6 | CITIZENSHIP OR PLACE OF ORGANIZATION  |     |    |
|   | United States                         |     |    |