## Edgar Filing: PERKINELMER INC - Form 4

PERKINELN	IER INC										
Form 4											
May 03, 2007	7										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION									OMB APPROVAL		
Washington, D.C. 20549								OMB Number:	3235-0287		
Check this if no longe						Expires:	January 31, 2005				
subject to	STATEM	ENT OF CHAN	GES IN BENEFICIAL OW				NERSHIP OF	Estimated a			
Section 16	SECUR	SECURITIES				burden hours per					
Form 4 or Form 5				с ···	-	1		response	0.5		
obligation	~ <b>^</b>	uant to Section 1									
may conti	Section 1/19	) of the Public Ut $20(h) = f the Ly$	•	•	• •			'n			
See Instru	ction	30(h) of the In	vestment	Company	Act	. 01 19	40				
1(b).											
(Print or Type R	esponses)										
× 51	1 /										
1. Name and Address of Reporting Person <sup>*</sup> 2. Issuer Name <b>and</b> Ticker or Trading 5. Relationship of Report								f Reporting Per	son(s) to		
TOD G ROB	BERT	Symbol	C				Issuer				
	IELMER INC [PKI]				(Charle all applicable)						
			Earliest Transaction				(Check all applicable)				
940 WINTER STREET (Month/Da (Street) 4. If Amen						X_ Director 10% Owner Officer (give title Other (specify below) below)					
			1/2007 Amendment, Date Original								
										6. Individual or Joint/Group Filing(Check	
							th/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person
			WALTHAM	MA 02451						Form filed by N	
WALTIAN	, MA 02431						Person				
(City)	(State) (Z	Zip) Tabl	e I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed of	f, or Beneficia	lly Owned		
1.Title of	2. Transaction Date	2A. Deemed	3.	3. 4. Securities			5. Amount of	6. Ownership	7. Nature of		
Security	(Month/Day/Year)	Execution Date, if	TransactionAcquired (A) orCodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)						Indirect		
(Instr. 3)		any					• •	(D) or	Beneficial Ownership		
		(Month/Day/Year)									
						Reported	(Instr. 4)				
					(A) or		Transaction(s)				
			Code V	Amount	(D)	Price	(Instr. 3 and 4)				
Common	05/01/2007		А	4,114	А	\$0	49,566	D			
Stock	03/01/2007		Λ	7,117	Л	ψυ	77,500	D			

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

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 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. Transact Code (Instr. 8)	5. Number onof Derivati Securities Acquired (A) or Disposed o (D) (Instr. 3, 4, and 5)	ve Expiration I (Month/Day	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (I	D) Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
NQ Stock Option (right to buy)	\$ 24.27	05/01/2007		А	7,097	<u>(1)</u>	05/01/2014	Common Stock	7,097	

## **Reporting Owners**

Reporting Owner Name / Addres	89	Relationships						
	Director	10% Owner	Officer	Other				
TOD G ROBERT 940 WINTER STREET WALTHAM, MA 02451	Х							
Signatures								
/s/ Katherine A. O'Hara	05/03/2007							

\*\*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).

(1) This option vests in three equal annual installments, beginning one year from the grant date, and may be exercised at any time after vesting and before the expiration date.

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.