PERKINELMER INC

Form 4

February 01, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

OMB APPROVAL

Number:

3235-0287

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0.5

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response...

if no longer subject to Section 16. Form 4 or Form 5

obligations

Check this box

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

may continue. See Instruction

1(b).

(Last)

(Print or Type Responses)

1. Name and Address of Reporting Person * FRIEL ROBERT F

(First)

2. Issuer Name and Ticker or Trading Symbol

5. Relationship of Reporting Person(s) to

Issuer

940 WINTER STREET

(Middle)

3. Date of Earliest Transaction

PERKINELMER INC [PKI]

_X__ Director 10% Owner

(Check all applicable)

(Month/Day/Year)

X_ Officer (give title

Other (specify

01/30/2007

below) Vice Chairman

below)

6. Individual or Joint/Group Filing(Check

4. If Amendment, Date Original Filed(Month/Day/Year)

3.

Α

Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

WALTHAM, MA 02451

(City) (State) (Zip)

(Street)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) any (Month/Day/Year)

Transaction(A) or Disposed of Code (D) (Instr. 8) (Instr. 3, 4 and 5)

5. Amount of 6. Ownership 7. Nature of Securities Form: Direct Indirect Beneficially (D) or Owned Following Reported

Indirect (I) (Instr. 4)

Beneficial Ownership (Instr. 4)

(A)

Transaction(s) (Instr. 3 and 4)

Code V Amount (D) 44,984

(1)

Price \$0 319,701 (2) D

Common Stock

01/30/2007

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

A

4. Securities Acquired

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)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 of iorDerivative Securities Acquired (A) or Disposed of (D (Instr. 3, 4, and 5))	Date	7. Title and Underlying (Instr. 3 and	Securities
				Code V	(A) (D	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
NQ Stock Option (right to buy)	\$ 23.45	01/30/2007		A	112,461	(3)	01/30/2014	Common Stock	112,461

Reporting Owners

Reporting Owner Name / Address	Relationships					
.r. g	Director	10% Owner	Officer	Other		
FRIEL ROBERT F 940 WINTER STREET WALTHAM, MA 02451	X		Vice Chairman			

Signatures

/s/ Katherine A. O'Hara (POA on file) Robert F.
Friel

02/01/2007

**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) Shares represent performance-based restricted stock that will vest in three equal annual installments beginning in 2008 if financial performance targets are achieved.
- The Reporting Person's direct holdings includes an aggregate of 30,000 shares acquired pursuant to the Reporting Person's (i) election to defer stock and/or compensation into the Deferred Compensation Plan, and/or (ii) reinvestment of dividends relating to the Reporting
- Person's account; and 2,879 shares acquired under PerkinElmer's Employee Stock Purchase Plan and or (ii) reinvestment of dividends relating to the Reporting Person's account.
- (3) This option vests equally in thirds, over a three year period starting in 2008, and has a 7 year exercise term.

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.

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