Edgar Filing: PERKINELMER INC - Form 4

Form 4	MER INC										
February 10,	2015										
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549									3235-028		
Check thi if no long subject to Section 1 Form 4 o Form 5 obligation may cont <i>See</i> Instru 1(b).	6. r Filed p inue.	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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								Expires: January 3 ⁻ 200 Estimated average burden hours per response 0.	
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> Letcher John R			2. Issuer Name and Ticker or Trading Symbol PERKINELMER INC [PKI]					5. Relationship of Reporting Person(s) to Issuer			
	(Check all applicable)										
(Mon 02/0 (Street) 4. If A			3. Date of Earliest Transaction (Month/Day/Year) 02/09/2015					Director 10% Owner X Officer (give title Other (specify below) below) See Remarks			
				If Amendment, Date Original iled(Month/Day/Year)				6. Individual or Joint/Group Filing(CheckApplicable Line)_X_ Form filed by One Reporting Person			
WALTHAM	I, MA 02451							Form filed by M Person	Iore than One Re	porting	
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction E (Month/Day/Ye	ar) Executio any		3. Transactic Code (Instr. 8) Code V	(Instr. 3,	spose 4 and (A) or	d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Common Stock	02/09/2015			F	1,407 (1)	D	\$ 45.98	35,752 <u>(2)</u>	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. Transac Code (Instr. 8	5. etionNumbe of B) Derival Securit Acquir (A) or Dispose of (D) (Instr. 2 4, and 2	(Month/Day ive ies ed ed	Date	Amou Unde Secur	le and int of rlying ities . 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna Follo Repo Trans (Instr
				Code	V (A) (I	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Letcher John R 940 WINTER STREET WALTHAM, MA 02451			See Remarks					
Signatures								
/s/ John L. Healy (POA on file) for John R.								
Letcher			02/10/2015					
<u>**</u> Signature of Reporting P		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) These shares are being surrendered to satisfy a tax withholding obligation upon vesting of restricted stock originally granted on February 7, 2012, as required by the Reporting Person's Restricted Stock Agreement.
- (2) The Reporting Person's direct holdings include 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.

Remarks:

Senior Vice President, Human Resources

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.