

PERKINELMER INC  
Form 3  
February 05, 2016

# FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

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## INITIAL STATEMENT OF 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

(Print or Type Responses)

1. Name and Address of Reporting Person \*

Â Tereau Daniel R  
(Last) (First) (Middle)

940 WINTER STREET  
(Street)

WALTHAM,Â MAÂ 02451  
(City) (State) (Zip)

2. Date of Event Requiring Statement

(Month/Day/Year)  
02/01/2016

3. Issuer Name and Ticker or Trading Symbol  
PERKINELMER INC [PKI]

4. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

☐ Director ☐ 10% Owner  
☒ Officer ☐ Other  
(give title below) (specify below)  
Please See Remarks

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

6. Individual or Joint/Group Filing(Check Applicable Line)  
☒ Form filed by One Reporting Person  
☐ Form filed by More than One Reporting Person

### Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security  
(Instr. 4)

2. Amount of Securities Beneficially Owned  
(Instr. 4)

3. Ownership Form:  
Direct (D)  
or Indirect (I)  
(Instr. 5)

4. Nature of Indirect Beneficial Ownership  
(Instr. 5)

Common Stock

6,305

D Â

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

SEC 1473 (7-02)

**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 Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security  
(Instr. 4)

2. Date Exercisable and Expiration Date  
(Month/Day/Year)

Date Exercisable Expiration Date

3. Title and Amount of Securities Underlying Derivative Security  
(Instr. 4)

Title Amount or Number of

4. Conversion or Exercise Price of Derivative Security

5. Ownership Form of Derivative Security:  
Direct (D)  
or Indirect

6. Nature of Indirect Beneficial Ownership  
(Instr. 5)

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				Shares		(I) (Instr. 5)	
NQ Stock Option (Right to Buy)	Â (1)	04/15/2021	Common Stock	9,726	\$ 43.735	D	Â
NQ Stock Option (Right to Buy)	Â (2)	04/15/2021	Common Stock	8,313	\$ 43.735	D	Â
NQ Stock Option (Right to Buy)	Â (3)	02/03/2022	Common Stock	10,636	\$ 46.255	D	Â

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Tereau Daniel R 940 WINTER STREET WALTHAM, MA 02451	Â	Â	Â Please See Remarks	Â

## Signatures

/s/ John L. Healy (POA on file) for Daniel R. Tereau 02/05/2016

\_\_Signature of Reporting Person

Date

## Explanation of Responses:

- \* If the form is filed by more than one reporting person, *see* Instruction 5(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 vested as to 1/3 of the underlying shares on April 15, 2015, which was the first anniversary of the grant date, and is scheduled to vest in equal installments thereafter until the third anniversary of the grant date.
- (2) This option is scheduled to fully vest on April 15, 2016, which is the second anniversary of the grant date.
- (3) This option vested as to 1/3 of the underlying shares on February 3, 2016, which was the first anniversary of the grant date, and is scheduled to vest in equal installments thereafter until the third anniversary of the grant date.

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### Remarks:

Senior Vice President, Strategy and Business Development

### Exhibit List:

Exhibit 24 - Power of Attorney

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.