

APPLERA CORP
Form 4
May 08, 2006

FORM 4

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

OMB APPROVAL

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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

(Print or Type Responses)

1. Name and Address of Reporting Person *
AYERS RICHARD H

(Last) (First) (Middle)

APPLERA CORPORATION, 301 MERRITT 7

(Street)

NORWALK, CT 06851-1070

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
APPLERA CORP [ABI/CRA]

3. Date of Earliest Transaction
(Month/Day/Year)

05/04/2006

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

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director 10% Owner
 Officer (give title below) Other (specify below)

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 Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Ownership (Instr. 4) | |
|---------------------------------------|--------------------------------------|----------------------------------------------------|--------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------|-----------------------------------|---|
| | | | Code | V | Amount or Price | | | |
| Applied Biosystems Group Common Stock | 05/04/2006 | | S ⁽¹⁾ | | 174 | D | \$ 28.94 2,958 | D |
| Applied Biosystems Group Common Stock | 05/04/2006 | | S ⁽¹⁾ | | 198 | D | \$ 28.93 2,760 | D |
| Applied Biosystems | 05/04/2006 | | S ⁽¹⁾ | | 96 | D | \$ 28.92 2,664 | D |

Group
Common
Stock

Applied
Biosystems

| | | | | | | | | | |
|-----------------|------------|--|------------------|----|---|----|-------|-------|---|
| Group | 05/04/2006 | | S ⁽¹⁾ | 27 | D | \$ | 28.91 | 2,637 | D |
| Common Stock | | | | | | | | | |

Applied
Biosystems

| | | | | | | | | | |
|-----------------|------------|--|------------------|----|---|----|-------|-------|---|
| Group | 05/04/2006 | | S ⁽¹⁾ | 37 | D | \$ | 28.88 | 2,600 | D |
| Common Stock | | | | | | | | | |

Applied
Biosystems

| | | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--------|---|-------------------------------------------------------------|
| Group | | | | | | | | 23,824 | I | By Suzanne L. Ayers Living Trust ⁽²⁾ |
| Common Stock | | | | | | | | | | |

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.

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(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

| 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. Transaction Code (Instr. 8) | 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | 6. Date Exercisable and Expiration Date (Month/Day/Year) | 7. Title and Amount of Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Nu Deriv Secur Benef Own Follo Repor Trans (Instr |
|-----------------------------------------------------|--------------------------------------------------------------------|-----------------------------------------|-------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------------------------------------------|-----------------------------------------------------|------------------------------------------------------------------------------|
| | | | | | | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |
| | | | | | | Code | V | (A) | (D) |

Reporting Owners

| Reporting Owner Name / Address | Relationships |
|--------------------------------|----------------------------------|
| | Director 10% Owner Officer Other |

AYERS RICHARD H
APPLERA CORPORATION X
301 MERRITT 7
NORWALK, CT 06851-1070

Signatures

/s/ Thomas P. Livingston, Attorney-in-Fact for Richard H. Ayers 05/08/2006

__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) Reflects sale by independent third-party administrator under the issuer's Insider Diversification Program.
 - (2) The reporting person is a trustee of the Suzanne L. Ayers Living Trust, a trust for the benefit of the reporting person's wife.

Remarks:

This is the second of two forms being filed by the reporting person on May 8, 2006.

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.