APPLERA CORP Form 4 August 04, 2006

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

SECURITIES

OMB

3235-0287 Number: January 31, Expires:

2005

OMB APPROVAL

Estimated average 0.5

burden hours per response...

5. Relationship of Reporting Person(s) to

Issuer

32.29

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

obligations

may continue.

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 See Instruction

2. Issuer Name and Ticker or Trading

Symbol

1(b).

Biosystems

(Print or Type Responses)

1. Name and Address of Reporting Person *

SLAYMAN CAROLYN W

			APPLERA CORP [ABI/CRA]					(Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction								
APPLERA CORPORATION, 301 MERRITT 7			(Month/Day/Year) 08/02/2006				_X_ Director 10% Owner Officer (give title below) Other (specify below)				
	(Street)		4. If Amend	lment, Date	e Original		(6. Individual or Jo	int/Group Filin	ng(Check	
			Filed(Month	Filed(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person			
NORWALK,					_	Form filed by More than One Reporting Person					
(City)	(State)	(Zip)	Table	I - Non-De	rivative S	ecurit	ies Acqu	ired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3) Applied Biosystems Group Common Stock	2. Transaction 1 (Month/Day/Ye	ear) Execu	eemed tion Date, if h/Day/Year)	Code (Instr. 8)	4. Securion(A) or D (Instr. 3,	(A)	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)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Applied Biosystems Group Common Stock	08/02/2006			S <u>(1)</u>	23	D	\$ 32.28	12,926	D		
Applied	08/02/2006			S(1)	34	D	\$	12,892	D		

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Group Common Stock							
Applied Biosystems Group Common Stock	08/02/2006	S(1)	34	D	\$ 32.3	12,858	D
Applied Biosystems Group Common Stock	08/02/2006	S <u>(1)</u>	68	D	\$ 32.31	12,790	D
Applied Biosystems Group Common Stock	08/02/2006	S <u>(1)</u>	68	D	\$ 32.32	12,722	D
Applied Biosystems Group Common Stock	08/02/2006	S <u>(1)</u>	45	D	\$ 32.35	12,677	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.

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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. Transactic Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	5	ate	7. Title Amou Under Securi (Instr.	nt of lying	8. Price of Derivative Security (Instr. 5)
						Date Exercisable	Expiration Date	Title	Amount or Number	

Code V (A) (D)

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

Shares

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

SEC 1474

(9-02)

Reporting Owners

Reporting Owner Name / Address

Director 10% Owner Officer Other

SLAYMAN CAROLYN W

APPLERA CORPORATION 301 MERRITT 7

NORWALK, CT 06851-1070

Signatures

/s/ Thomas P. Livingston, Attorney-in-Fact for Carolyn W.
Slayman 08/04/2006

**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.

Remarks:

This is the second of two forms being filed by the reporting person on August 4, 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.

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