#### **BENCHIMOL CLAUDE**

Form 4 May 17, 2005

### FORM 4

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

**OMB** 

Check this box if no longer subject to

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

3235-0287 Number: January 31, Expires:

2005

0.5

**OMB APPROVAL** 

Section 16. Form 4 or Form 5 obligations

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

burden hours per response...

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may continue. See Instruction 1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading BENCHIMOL CLAUDE Issuer Symbol INVITROGEN CORP [IVGN] (Check all applicable) (Last) (First) (Middle) 3. Date of Earliest Transaction (Month/Day/Year) Director 10% Owner X\_ Officer (give title \_ Other (specify 1600 FARADAY AVENUE 01/31/2005 below) below) Svp (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check

Filed(Month/Day/Year)

#### CARLSBAD, CA 92008

(State)

(Zin)

(City)

(City)	(State)	Tabl	e I - Non-E	<b>Derivative</b>	Secui	rities Acqu	ired, Disposed of	, or Beneficiall	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	4. Securi on(A) or D (Instr. 3,	ispose	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)
Common Stock	01/31/2005		J	286	A	\$ 44.608	26,139	D	
Common Stock	04/30/2005		J	273	A	\$ 44.608	26,412	D	

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

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.

Applicable Line)

Person

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

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# 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 onDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour Underlying Securit (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amo or Num of Sh
Incentive Stock Option (right to buy)	\$ 76.86	05/13/2005		A	1,301	<u>(1)</u>	05/13/2015	Common Stock	1,3
Non-Qualified Stock Option (right to buy)	\$ 76.86	05/13/2005		A	11,199	<u>(1)</u>	05/13/2015	Common Stock	11,1
Restricted Share Units	\$ 0	05/13/2005		A	3,000	(2)	<u>(3)</u>	Common Stock	3,0

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
r g	Director	10% Owner	Officer	Other			
BENCHIMOL CLAUDE							
1600 FARADAY AVENUE			Svp				
CARLSBAD, CA 92008			_				

## **Signatures**

By: John A. Cottingham For: Claude D.
Benchimol 05/17/2005

\*\*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).
- Option vesting is over a 4 year period, vesting 25% on each anniversary of the May 13, 2005 grant date, contingent upon continued service to Invitrogen.
- (2) The restricted share units shall vest 100% on the third anniversary of the May 13, 2005 grant date.
- (3) Once vested, restricted share units do not expire. They can be converted into shares of Invitrogen common stock upon the termination of the Director's service to the Registrant.

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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