Edgar Filing: AMERISOURCEBERGEN CORP - Form 4

AMERISOURCEBERGEN CORP

Form 4

November 13, 2015

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB

Washington, D.C. 20549 Check this box

3235-0287 Number:

OMB APPROVAL

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

January 31, Expires: 2005

SECURITIES

Estimated average burden hours per response...

obligations may continue. See Instruction

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

0.5

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person * **COLLIS STEVEN H**

2. Issuer Name and Ticker or Trading

5. Relationship of Reporting Person(s) to

Symbol

[ABC]

AMERISOURCEBERGEN CORP

(Check all applicable)

(Last) (First)

(Middle)

3. Date of Earliest Transaction

_X__ Director 10% Owner

(Month/Day/Year)

X_ Officer (give title Other (specify below)

1300 MORRIS DRIVE 11/11/2015

President & CEO 6. Individual or Joint/Group Filing(Check

4. If Amendment, Date Original

Applicable Line)

Filed(Month/Day/Year)

3.

X Form filed by One Reporting Person Form filed by More than One Reporting

D

Person

Issuer

CHESTERBROOK, PA 19087

(City) (State) (Zip)

(Street)

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1.Title of Security (Instr. 3)

2. Transaction Date 2A. Deemed (Month/Day/Year) Execution Date, if

(Month/Day/Year)

TransactionAcquired (A) or Code Disposed of (D) (Instr. 3, 4 and 5) (Instr. 8)

4. Securities

5. Amount of Securities Beneficially Owned Following

6. Ownership 7. Nature of Form: Direct Indirect (D) or Indirect (I) (Instr. 4)

Beneficial Ownership (Instr. 4)

(A)

Reported Transaction(s)

or

(Instr. 3 and 4) Code V Amount (D) Price

Common Stock

217,696

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.

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. Transactio Code (Instr. 8) | 5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5) | | | 7. Title and Amc Underlying Secu (Instr. 3 and 4) | |
|---|---|--------------------------------------|---|--|---|---------------------|--------------------|---|----------------|
| | | | | Code V | (A) (D) | Date Exercisable | Expiration Date | Title | Ar Nu Sh |
| Non-qualified Stock Option (Right to Buy) | \$ 98.24 | 11/11/2015 | | A | 153,406 | <u>(1)</u> | 11/11/2022 | Common Stock | 1: |
| Restricted Stock Units | <u>(2)</u> | 11/11/2015 | | A | 13,640 | 11/11/2018 | 11/11/2022 | Common Stock | 1 |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | | |
|--------------------------------|---------------|-----------|-----------------|-------|--|--|
| 1 8 | Director | 10% Owner | Officer | Other | | |
| COLLIS STEVEN H | | | | | | |
| 1300 MORRIS DRIVE | X | | President & CEO | | | |
| CHESTERBROOK, PA 19087 | | | | | | |

Signatures

John G. Chou for Steven H.
Collis

**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) Exerciseable in four equal annual installments on 11/11/16, 11/11/17, 11/11/18 and 11/11/19
- (2) Annual grant of restricted stock units received for no consideration and vests 100% on the third anniversary of the date of grant 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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