Edgar Filing: HYLE KATHLEEN W - Form 4

HYLE KATH	ILEEN W										
Form 4											
May 17, 2010)										
FORM 4 UNITED STATES SECURITIES AND EXCHANCE COMMISSION								PPROVAL			
UNITED STATES SECONTIES AND EXCHANGE COMMISSION							OND	3235-0287			
Check this	shox		Was	hington,	D.C. 205	549			Number:		
if no long	ar .					CTA			Expires:	January 31, 2005	
subject to STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF							Estimated a	Estimated average			
beenon 10.				SECURITIES					burden hours per		
Form 4 or Form 5		urcuent to	Soction 16	S(n) of the	Socuriti	os Fr	vohon	x_{2} Act of 1034	response	0.5	
obligation	~ [^]							ge Act of 1934, f 1935 or Sectio	m		
may conti	nue.			vestment (•	- ·			/11		
See Instru 1(b).	ction	50(11)	or the m	vestinent	compun.	, 1100	. 01 17	10			
1(0)											
(Print or Type R	esponses)										
HYLE KATHLEEN W Symbol				Name and '					nship of Reporting Person(s) to		
								Issuer			
AMERISOURCEBERGEN CORP						(Chec	Check all applicable)				
			[ABC]					(ene	en un applicaen	-	
(Last)	(First)	(Middle)	3. Date of	Earliest Tra	nsaction			_X_ Director		6 Owner	
			(Month/D	-				Officer (give below)	title Other (specify below)		
1300 MORR	IS DRIVE		05/13/20)10							
(Street) 4			4. If Amer	4. If Amendment, Date Original					6. Individual or Joint/Group Filing(Check		
			Filed(Mon	th/Day/Year)				Applicable Line)			
		~~~						_X_ Form filed by Form filed by M			
CHESTERB	ROOK, PA 19	9087						Person	viore unan one re	eporting	
(City)	(State)	(Zip)	Table	e I - Non-De	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of	2. Transaction D	Date 2A. Dee	med	3.	4. Securi	ties		5. Amount of	6. Ownership	7. Nature of	
Security	(Month/Day/Ye		on Date, if TransactionAcquired (A) or Code Disposed of (D) /Day/Year) (Instr. 8) (Instr. 3, 4 and 5)					Beneficially (1	Form: Direct	Indirect	
(Instr. 3)		any (Month)							(D) or Indirect (I)	Beneficial Ownership	
		(INIOIILII/	Day/ I cal)	(Insu. 0)	(111501. 5,	+ anu	5)	Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported			
						or		Transaction(s)			
				Code V	Amount	(D)	Price	(Instr. 3 and 4)			
Common	05/13/2010			А	1,582	А	\$0	1,582	D		
Stock	00/10/2010		$\begin{array}{ccc} A & 1,362 & A & \underline{(1)} \end{array}$				(1)	1,002			
Common	05/12/2010				510		\$0	2 009	D		
Stock	05/13/2010			А	516	А	(2)	2,098	D		

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

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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. Transactio Code (Instr. 8)	5. Number prof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	-		7. Title and Amou Underlying Secur (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Am or Nur of Sha
Nonqualified stock option (right to buy)	\$ 31.6	05/13/2010		А	9,347	05/13/2011 <u>(3)</u>	05/13/2020	Common Stock	9,:

## **Reporting Owners**

<b>Reporting Owner Name / Address</b>	Relationships						
	Director	10% Owner	Officer	Other			
HYLE KATHLEEN W 1300 MORRIS DRIVE CHESTERBROOK, PA 19087	Х						
Signatures							
John G. Chou for Kathleen W. Hyle		05/17/2010					
**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) Initial award of restricted stock granted on date of election to the Board of Directors and vests 100% on the third anniversary of the date of grant
- (2) Pro-rated quarterly grant of restricted stock in lieu of retainer that vests 100% on the third anniversary of the date of grant.
- (3) Exercisable in three equal annual installments on 05/13/11, 05/13/12 and 05/13/13

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.