Edgar Filing: Caneris Thomas A - Form 4

Form 4	mas A										
January 20, 2	_								OMB AI	PPROVAL	
FORM	UNITE) STATES		ITIES A hington,			IGE (COMMISSION	OMB Number:	3235-0287	
Check this box if no longer subject to Section 16. Form 4 or			F CHANGES IN BENEFICIAL OWN SECURITIES					NERSHIP OF	Expires: Estimated a burden hou response		
Form 5 obligatio may cont <i>See</i> Instru 1(b).	ns Section 17	7(a) of the		ility Hold	ing Com	pany	Act of	e Act of 1934, f 1935 or Section 40	·		
(Print or Type I	Responses)										
1. Name and Address of Reporting Person <u>*</u> Caneris Thomas A			2. Issuer Name and Ticker or Trading Symbol PharMerica CORP [PMC]				2	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction				(Chec	к ап аррпсаве	;)		
1901 CAMI	PUS PLACE		(Month/D 01/18/20	•				Director X Officer (give below) SVP, C		o Owner er (specify ry	
				ndment, Date Original th/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)			
LOUISVIL	LE, KY 40299							_X_ Form filed by C Form filed by M Person			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecurit	ies Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	2. Transaction D (Month/Day/Yea	r) Executionary	xecution Date, if	3.4. Securities AcquiredTransaction(A) or Disposed ofCode(D)(Instr. 8)(Instr. 3, 4 and 5)			Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)			
Common				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Stock, \$0.01 par value	01/18/2012			А	19,138	А	\$0	52,965	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. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Unde Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
Caneris Thomas A 1901 CAMPUS PLACE LOUISVILLE, KY 40299			SVP, GC and Secretary					
Signatures								
Michael J. Culotta, Attorney-in-Fact		01/20/2012	2					
** 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).

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.