McKay Robert A Form 4 January 20, 2012

### FORM 4

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

Check this box if no longer

subject to Section 16. Form 4 or Form 5

obligations may continue. See Instruction STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

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

PharMerica CORP [PMC]

3. Date of Earliest Transaction

(Print or Type Responses)

1(b).

(Last)

(City)

1. Name and Address of Reporting Person \* McKay Robert A

(First) (Middle)

1901 CAMPUS PLACE

(Street)

(State)

(Zip)

(Month/Day/Year) 01/18/2012

Symbol

4. If Amendment, Date Original

Filed(Month/Day/Year)

3.

5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Issuer

(Check all applicable)

**OMB** 

Number:

Expires:

response...

Estimated average

burden hours per

Director 10% Owner X\_ Officer (give title Other (specify below)

below) SVP of Trade Relations

6. Individual or Joint/Group Filing(Check

Applicable Line)

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

Person

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

LOUISVILLE, KY 40299

1.Title of 2. Transaction Date 2A. Deemed Security (Month/Day/Year) Execution Date, if (Instr. 3) (Month/Day/Year)

Code

Transaction(A) or Disposed of (D) (Instr. 8)

(Instr. 3, 4 and 5)

4. Securities Acquired

(A)

(D)

5. Amount of Securities Beneficially Owned Following Reported

(D) or

D

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

**OMB APPROVAL** 

3235-0287

January 31,

2005

0.5

Transaction(s) (Instr. 3 and 4)

Common Stock.

\$0.01 par value

01/18/2012

Α

14.529 Α

Amount

\$0

Price

52,165

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.

#### Edgar Filing: McKay Robert A - Form 4

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

| 1. Title of | 2.          | 3. Transaction Date |                    | 4.         | 5.         | 6. Date Exer        |                 | 7. Title a   |        | 8. Price of | 9. Nu   |
|-------------|-------------|---------------------|--------------------|------------|------------|---------------------|-----------------|--------------|--------|-------------|---------|
| Derivative  | Conversion  | (Month/Day/Year)    | Execution Date, if |            | onNumber   | Expiration D        |                 | Amount       |        | Derivative  | Deriv   |
| Security    | or Exercise |                     | any                | Code       | of         | (Month/Day/         | Year)           | Underly      | _      | Security    | Secui   |
| (Instr. 3)  | Price of    |                     | (Month/Day/Year)   | (Instr. 8) | Derivative | e                   |                 | Securitie    | es     | (Instr. 5)  | Bene    |
|             | Derivative  |                     |                    |            | Securities | S                   |                 | (Instr. 3    | and 4) |             | Own     |
|             | Security    |                     |                    |            | Acquired   |                     |                 |              |        |             | Follo   |
|             | ,           |                     |                    |            | (A) or     |                     |                 |              |        |             | Repo    |
|             |             |                     |                    |            | Disposed   |                     |                 |              |        |             | Trans   |
|             |             |                     |                    |            | of (D)     |                     |                 |              |        |             | (Instr  |
|             |             |                     |                    |            | (Instr. 3, |                     |                 |              |        |             | (IIISti |
|             |             |                     |                    |            | 4, and 5)  |                     |                 |              |        |             |         |
|             |             |                     |                    |            | 4, and 3)  |                     |                 |              |        |             |         |
|             |             |                     |                    |            |            |                     |                 | A            | mount  |             |         |
|             |             |                     |                    |            |            | D.                  | E               | 01           | r      |             |         |
|             |             |                     |                    |            |            | Date<br>Exercisable | Expiration Date | Title Number | umber  |             |         |
|             |             |                     |                    |            |            |                     |                 | 01           |        |             |         |
|             |             |                     |                    | Code V     | (A) (D)    |                     |                 |              | hares  |             |         |

Deletionship

Relations

## **Reporting Owners**

| Reporting Owner Name / Address | Ketationships |           |         |       |  |  |  |  |
|--------------------------------|---------------|-----------|---------|-------|--|--|--|--|
|                                | Director      | 10% Owner | Officer | Other |  |  |  |  |
| McKay Robert A                 |               |           | SVP of  |       |  |  |  |  |
| 1901 CAMPUS PLACE              |               |           | Trade   |       |  |  |  |  |

## **Signatures**

LOUISVILLE, KY 40299

Michael J. Culotta, Attorney-in-Fact 01/20/2012

\*\*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.

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