

Guttman Tim G.
Form 3
February 17, 2012

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF 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

(Print or Type Responses)

| | | | | |
|---|--|--|---|---|
| 1. Name and Address of Reporting Person * Guttman Tim G. (Last) (First) (Middle) | | 2. Date of Event Requiring Statement (Month/Day/Year) 02/13/2012 | 3. Issuer Name and Ticker or Trading Symbol AMERISOURCEBERGEN CORP [ABC] | |
| 1300 MORRIS DRIVE (Street) | | (Check all applicable) | | 5. If Amendment, Date Original Filed(Month/Day/Year) |
| CHESTERBROOK, PA 19087 (City) (State) (Zip) | | <input type="checkbox"/> Director <input type="checkbox"/> 10% Owner <input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other (give title below) (specify below) Acting Chief Financial Officer | | 6. Individual or Joint/Group Filing(Check Applicable Line) <input checked="" type="checkbox"/> Form filed by One Reporting Person <input type="checkbox"/> Form filed by More than One Reporting Person |

Table I - Non-Derivative Securities Beneficially Owned

| 1. Title of Security (Instr. 4) | 2. Amount of Securities Beneficially Owned (Instr. 4) | 3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5) | 4. Nature of Indirect Beneficial Ownership (Instr. 5) |
|------------------------------------|--|---|--|
| Common Stock | 11,307 | D | |

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

SEC 1473 (7-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | 4. Conversion or Exercise Price of Derivative Security | 5. Ownership Form of Derivative Security: Direct (D) or Indirect | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|---|---|--|--|--|--|
| | Date Exercisable Expiration Date | Title Amount or Number of | | | |

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| | | | | Shares | | (I) (Instr. 5) | |
|---|---------------------------|------------|--------------|--------|-----------|-------------------|---|
| Non-Qualified Stock Option (right to buy) | 02/27/2009 ⁽¹⁾ | 02/27/2015 | Common Stock | 6,375 | \$ 21.46 | D | Â |
| Non-Qualified Stock Option (right to buy) | 02/19/2010 ⁽²⁾ | 02/19/2016 | Common Stock | 13,125 | \$ 17.775 | D | Â |
| Non-Qualified Stock Option (right to buy) | 03/03/2011 ⁽³⁾ | 03/03/2017 | Common Stock | 26,250 | \$ 28 | D | Â |
| Non-Qualified Stock Option (right to buy) | 02/16/2012 ⁽⁴⁾ | 02/16/2018 | Common Stock | 26,250 | \$ 36.37 | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | |
|---|---------------|-----------|---|-------|
| | Director | 10% Owner | Officer | Other |
| Guttman Tim G. 1300 MORRIS DRIVE CHESTERBROOK, PA 19087 | Â | Â | Â Acting Chief Financial Officer | Â |

Signatures

John G. Chou for Tim G.
Guttman

02/17/2012

__Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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) Exercisable in four equal annual installments on 2/27/09, 2/27/10, 2/27/11 and 2/27/12
- (2) Exercisable in four equal annual installments on 02/19/10, 02/19/11, 02/19/12 and 02/19/13
- (3) Exercisable in four equal annual installments on 03/03/11, 03/03/2012, 03/03/2013 and 03/03/2014
- (4) Exercisable in four equal annual installments on 02/16/12, 02/16/13, 02/16/14 and 02/16/15

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.