FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL								
OMB Number:	3235-0287							
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* Bernard Gordon R				2. Issuer Name and Ticker or Trading Symbol CUMBERLAND PHARMACEUTICALS INC [CPIX]										all app		10%	Owner		
(Last) (First) (Middle) 2525 WEST END AVE. SUITE 950				3. Date of Earliest Transaction (Month/Day/Year) 03/16/2012								-		Office below	er (give title v)	Othe belo	er (specify w)		
(Street) NASHVII (City)	LLE TN		7203 Zip)		4. If	Ame	ndment,	Date of	f Original	Filed	(Month/Da	ay/Yea	ar)		Indiv ne) X	Form	n filed by One	o Filing (Check e Reporting Pe re than One R	rson
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date		Date,	Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			and Securi Benefi		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)			(11311.4)
Common stock 03/16			03/16	6/2012				A		1,000(1)		A	\$7.	.72 110,332		10,332	D		
	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 of Exercise (Month/Day/Year) Frice of Derivative Security 3. Transaction Date Execution Date (Month/Day/Year) if any (Month/Day/Year)		Date,	Transaction Code (Instr. 8)		n of Derivative (Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		ount		ivative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction ((Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		

Explanation of Responses:

1. Restricted stock award will vest 100% on 3/16/2013.

Remarks:

Gordon R. Bernard by: /s/ Rick 03/19/2012 S. Greene as attorney-in-fact

** Signature of Reporting Person Date

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

- * 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.

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 Number.

POWER OF ATTORNEY

Know all by these presents, I hereby appoint Jean W. Marstiller and Rick S. Greene, or any one of them, to act as my agent and attorney-in-fact for the purpose of completing, executing and filing on my behalf with the Securities and Exchange Commission, the NASDAQ Stock Market LLC or any other exchange or self-regulatory body, any Form 3 "Initial Statement of Beneficial Ownership of Securities", Form 4 "Statement of Changes in Beneficial Ownership of Securities", Form 5 "Annual Statement of Beneficial Ownership of Securities", Form 144 "Notice of Proposed Sale of Securities", Schedule 13D pursuant to Rule 13d-101 of the Securities Exchange Act of 1934, or any other similar form to report securities ownership that may, in the opinion of any of them be necessary, with respect to any transaction in securities of Cumberland Pharmaceuticals Inc.

Nothing herein shall relieve me of the responsibility for the accuracy of the information and representations contained in any Form 3, Form 4, Form 5, Form 144, Schedule 13D, or other similar form completed, executed and filed pursuant to this power of attorney.

This power of attorney shall supersede all similar prior powers of attorney and will remain effective as to the agents and attorneys-in-fact referred to above until I revoke or amend it by written notice to such persons or until the undersigned is no longer required to file Form 3, Form 4, Form 5, Form 144, Schedule 13D or other similar form completed, executed and filed pursuant to this power of attorney.

IN WITNESS WHEREOF, the undersigned has caused this Power of Attorney to be executed on this 24th day of January 2012.

/s/ Gordon R. Bernard

Gordon R. Bernard