#### MERGE HEALTHCARE INC

Form 4

March 02, 2015

# FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

OMB Number:

3235-0287

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January 31, 2005

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**OMB APPROVAL** 

response...

subject to Section 16. Form 4 or Form 5 obligations may continue.

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if no longer

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 See Instruction

1(b).

(City)

(State)

(Zip)

(Print or Type Responses)

1. Name and Address of Reporting Person \* 5. Relationship of Reporting Person(s) to 2. Issuer Name and Ticker or Trading Reicher Murray A. Issuer Symbol MERGE HEALTHCARE INC (Check all applicable) [MRGE] (Last) (First) (Middle) 3. Date of Earliest Transaction Director 10% Owner X\_ Officer (give title Other (specify (Month/Day/Year) below) 350 NORTH ORLEANS 02/26/2015 Chief Medical Officer STREET, FIRST FLOOR (Street) 4. If Amendment, Date Original 6. Individual or Joint/Group Filing(Check Filed(Month/Day/Year) Applicable Line) \_X\_ Form filed by One Reporting Person Form filed by More than One Reporting CHICAGO, IL 60654

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

	Tuble 1 11011 Delivative Securities required, Disposed of, or Delicitating Owned								
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)				5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	
Common Stock	02/26/2015		P	5,955	A	\$ 3.93	72,356	I	Trust (1)
Common Stock	02/26/2015		P	2,644	A	\$ 3.94	75,000	I	Trust (1)
Common Stock	02/26/2015		P	4,400	A	\$ 3.95	79,400	I	Trust (1)
Common Stock	02/26/2015		P	2,500	A	\$ 3.9586	81,900	I	Trust (1)
Common Stock	02/26/2015		P	1,500	A	\$ 3.9595	83,400	I	Trust (1)

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Common Stock	02/26/2015	P	550	A	\$ 3.96	83,950	I	Trust (1)
Common Stock	02/26/2015	P	3,700	A	\$ 3.97	87,650	I	Trust (1)
Common Stock	02/26/2015	P	4,350	A	\$ 3.98	92,000	I	Trust (1)
Common Stock	02/26/2015	P	1,300	A	\$ 3.9877	93,300	I	Trust (1)
Common Stock	02/26/2015	P	1,700	A	\$ 3.99	95,000	I	Trust (1)

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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Titl	e and	8. Price of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transac	ctionNumber	Expiration D	ate	Amou	nt of	Derivative
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Under	lying	Security
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	B) Derivativ	ve		Securi	ities	(Instr. 5)
	Derivative				Securitie	s		(Instr.	3 and 4)	
	Security				Acquired	l				
	·				(A) or					
					Disposed	i				
					of (D)					
					(Instr. 3,					
					4, and 5)					
									Amount	
						Date	Expiration		or	
						Exercisable	•	Title Number of		
						Lacionadio				
				Code	V (A) (D)				Shares	

# **Reporting Owners**

Relationships Reporting Owner Name / Address

Director 10% Owner Officer Other

Reicher Murray A. 350 NORTH ORLEANS STREET FIRST FLOOR CHICAGO, IL 60654

Chief Medical Officer

2 Reporting Owners

### **Signatures**

Julie Ann B. Schumitsch, by Power of Attorney for Murray A. Reicher

03/02/2015

\*\*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) Shares of Common Stock held by the Reicher Family Trust, of which Murray A. Reicher and Danielle M. Reicher are the Trustees, the beneficial ownership of which Dr. Reicher disclaims.

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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