

MERGE HEALTHCARE INC
 Form 4
 June 16, 2010

FORM 4

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

OMB APPROVAL

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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

(Print or Type Responses)

1. Name and Address of Reporting Person *
 Merrick RIS, LLC

2. Issuer Name and Ticker or Trading Symbol
 MERGE HEALTHCARE INC
 [MRGE]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)
 233 NORTH MICHIGAN AVENUE, SUITE 2330
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
 06/14/2010

____ Director
 ____ Officer (give title below)
 10% Owner
 ____ Other (specify below)

CHICAGO, IL 60601

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)
 ____ Form filed by One Reporting Person
 Form filed by More than One Reporting Person

(City) (State) (Zip)

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | 4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--------------------------------------|----------------------------------------------------|--------------------------------|-------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------|
| | | | | (A) or (D) | Price | | |
| | | | Code | V | Amount | | |
| Common Stock | 06/14/2010 | | P | | 1,800 | \$ 2.62 | D |
| Common Stock | 06/14/2010 | | P | | 100 | \$ 2.71 | D |
| Common Stock | 06/14/2010 | | P | | 700 | \$ 2.72 | D |
| Common Stock | 06/14/2010 | | P | | 1,100 | \$ 2.73 | D |
| Common Stock | 06/14/2010 | | P | | 1,000 | \$ 2.74 | D |

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| | | | | | | | |
|----------------------------------------------------|------------|---|--------|---|---------|------------|---|
| Common Stock | 06/14/2010 | P | 7,000 | A | \$ 2.75 | 30,376,837 | D |
| Common Stock | 06/15/2010 | P | 400 | A | \$ 2.73 | 30,377,237 | D |
| Common Stock | 06/15/2010 | P | 1,100 | A | \$ 2.74 | 30,378,337 | D |
| Common Stock | 06/15/2010 | P | 2,600 | A | \$ 2.75 | 30,380,937 | D |
| Common Stock | 06/16/2010 | P | 500 | A | \$ 2.73 | 30,381,437 | D |
| Common Stock | 06/16/2010 | P | 200 | A | \$ 2.74 | 30,381,637 | D |
| Common Stock | 06/16/2010 | P | 29,600 | A | \$ 2.75 | 30,411,237 | D |
| Series A Non-Voting Preferred Stock ⁽¹⁾ | | | | | | 10,000 | D |

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

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.

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(9-02)

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. Transaction Code (Instr. 8) | 5. Number 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 Underlying Securities (Instr. 3 and 4) | 8. Price of Derivative Security (Instr. 5) | 9. Number of Derivative Securities Owned Following Transaction (Instr. 3 and 4) |
|--------------------------------------------|--------------------------------------------------------|--------------------------------------|----------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------------------------------------------|--------------------------------------------|---------------------------------------------------------------------------------|
| | | | | Code | V (A) (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares |

Reporting Owners

Reporting Owner Name / Address

Relationships

Reporting Owners

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Director 10% Owner Officer Other

Merrick RIS, LLC
233 NORTH MICHIGAN AVENUE
SUITE 2330
CHICAGO, IL 60601 X

FERRO MICHAEL W JR
233 NORTH MICHIGAN AVENUE
SUITE 2330 X X
CHICAGO, IL 60601

Signatures

Julie Ann B. Schumitsch, by Power of Attorney for Merrick RIS, LLC 06/16/2010

Signature of Reporting Person Date

Julie Ann B. Schumitsch, by Power of Attorney for Michael W. Ferro, Jr. 06/16/2010

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) On April 27, 2010, Merge Healthcare Incorporated issued an aggregate of 41,750 shares of Series A Non-voting Preferred Stock, par value \$0.01 per share and 7,515,000 shares of its Common Stock, par value \$0.01 per share, for a total purchase price of approximately \$41,750,000.

Remarks:

The reporting persons are Merrick RIS, LLC ("Merrick"), a Delaware limited liability company, and Michael W. Ferro, Jr. ("M...

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.