

MERGE HEALTHCARE INC  
Form 4  
September 03, 2010

**FORM 4** UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287  
Expires: January 31, 2015  
Estimated average burden hours per response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

**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)

3. Date of Earliest Transaction (Month/Day/Year)  
09/01/2010

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

233 NORTH MICHIGAN AVENUE, SUITE 2330

(Street)

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

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

CHICAGO, IL 60601

(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 Ownership (Instr. 4)
				(A) or (D)	Price		
Common Stock	09/01/2010		P	60 A	\$ 2.53	30,965,197	D
Common Stock	09/01/2010		P	500 A	\$ 2.55	30,965,697	D
Common Stock	09/01/2010		P	465 A	\$ 2.56	30,966,162	D
Common Stock	09/01/2010		P	200 A	\$ 2.565	30,966,362	D
Common Stock	09/01/2010		P	34,635 A	\$ 2.57	31,000,997	D

Edgar Filing: MERGE HEALTHCARE INC - Form 4

Common Stock	09/01/2010		P	400	A	\$ 2.575	31,001,397	D	
Common Stock	09/01/2010		P	3,600	A	\$ 2.58	31,004,997	D	
Common Stock	09/01/2010		P	440	A	\$ 2.59	31,005,437	D	
Common Stock	09/02/2010		P	200	A	\$ 2.52	31,005,637	D	
Common Stock	09/02/2010		P	3,500	A	\$ 2.53	31,009,137	D	
Common Stock	09/02/2010		P	200	A	\$ 2.5375	31,009,337	D	
Common Stock	09/02/2010		P	9,100	A	\$ 2.54	31,018,437	D	
Common Stock	09/02/2010		P	3,700	A	\$ 2.55	31,022,137	D	
Common Stock	09/02/2010		P	6,000	A	\$ 2.56	31,028,137	D	
Common Stock	09/02/2010		P	200	A	\$ 2.57	31,028,337	D	
Common Stock	09/02/2010		P	1,100	A	\$ 2.58	31,029,437	D	
Common Stock	09/02/2010		P	4,400	A	\$ 2.59	31,033,837	D	
Common Stock	09/02/2010		P	6,100	A	\$ 2.6	31,039,937	D	
Series A Non-Voting Preferred Stock <sup>(1)</sup>							10,000	D	
Common Stock							500,000	I	Subsidiary Holding <sup>(2)</sup>

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.**

SEC 1474  
(9-02)

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

1. Title of Derivative	2. Conversion	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if	4. Transaction	5. Number	6. Date Exercisable and Expiration Date	7. Title and Amount of	8. Price of Derivative	9. Nu Deriv
------------------------	---------------	--------------------------------------	-------------------------------	----------------	-----------	---	------------------------	------------------------	-------------

Edgar Filing: MERGE HEALTHCARE INC - Form 4

Security (Instr. 3)	or Exercise Price of Derivative Security	any (Month/Day/Year)	Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day/Year)	Underlying Securities (Instr. 3 and 4)	Security (Instr. 5)	Secur Bene Own Follo Repo Trans (Instr	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	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 CHICAGO, IL 60601	X	X		

## Signatures

Julie Ann B. Schumitsch, by Power of Attorney for Merrick RIS, LLC 09/03/2010  
\_\_Signature of Reporting Person Date

Julie Ann B. Schumitsch, by Power of Attorney for Michael W. Ferro, Jr. 09/03/2010  
\_\_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.
- (2) Shares issued to and held by Merrick Healthcare Solutions, LLC, an Indiana limited liability company ("Merrick Healthcare") as consideration of the purchase price of the acquisition by Merge Healthcare Incorporated of the assets of and relating to the Olivia Greets business line previously owned by Merrick Healthcare, a subsidiary operation of Merrick Ventures, LLC, a private investment firm, of which Merrick RIS is also a subsidiary. Merrick RIS is not a beneficial owner of these shares held by Merrick Healthcare.

### Remarks:

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

## Edgar Filing: MERGE HEALTHCARE INC - Form 4

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.