Edgar Filing: MERGE HEALTHCARE INC - Form 4

MERGE HEALTHCARE INC Form 4 June 18, 2014UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).TATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIESFiled 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									N OMB Number: Expires: Estimate burden h response	January 31, 2005 d average ours per		
STEARNS NEELE E Symbol			er Name and Ticker or Trading JE HEALTHCARE INC El				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
				of Earliest Transaction Day/Year)				X_ Director 10% Owner Officer (give title Other (specify below) below)				
(Street) 4. If Amer				nth/Day/Year) Ap _X				Applicable Line) _X_ Form filed by Form filed by	 Individual or Joint/Group Filing(Check Applicable Line) X_ Form filed by One Reporting Person Form filed by More than One Reporting Person 			
(City)	(State)	(Zip)	Table	e I - Non-D	erivative S	ecuri	ties Aco	quired, Disposed	of, or Benefic	cially Owned		
1.Title of Security (Instr. 3)	2. Transaction Data (Month/Day/Year)	Execution any		3. Transactic Code (Instr. 8) Code V	on(A) or Dis (D) (Instr. 3, 4	sposed	l of	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)		
Restricted Common Stock	06/16/2014			А	43,860 (1)	A	\$ 0	43,860	D			
Restricted Common Stock	06/16/2014			А	8,772 (2)	А	\$0	8,772	D			
Common Stock								221,610	Ι	Partnership (3)		

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 Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transact Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne 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				
STEARNS NEELE E 350 NORTH ORLEANS STREET, FIRST FLOOR CHICAGO, IL 60654	Х							
Signatures								
/s/ Julie Ann B. Schumitsch, by Power of Attorney for Neele E. Stearns, Jr.								

**Signature of Reporting Person

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).

Restricted Stock Award granted pursuant to the 2005 Equity Incentive Plan (a Rule 16b-3 shareholder approved employee benefit plan) of (1) Merge Healthcare Incorporated. Restrictions on such shares shall lapse and such shares shall become immediately and fully vested on June 16, 2015, one year from date of grant, subject to additional terms and conditions as set forth in the restricted stock award agreement.

Restricted Stock Award granted pursuant to the 2005 Equity Incentive Plan (a Rule 16b-3 shareholder approved employee benefit plan) of Merge Healthcare Incorporated. Restrictions on such shares shall lapse and such shares shall become immediately and fully vested to the

- (2) extent of one fourth of such shares on each of September 16, 2014, December 16, 2014, March 16, 2015 and June 16, 2015, subject to additional terms and conditions as set forth in the restricted stock award agreement.
- Shares of Common Stock held by S I P of Illinois Limited Partnership, of which Mr. Stearns is a partner, the beneficial ownership of (3)which Mr. Stearns disclaims.

Date

06/18/2014

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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.