#### Edgar Filing: MERGE HEALTHCARE INC - Form 3

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#### MERGE HEALTHCARE INC Form 3 June 06, 2008 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549 OMB Number 3235-0104

### INITIAL STATEMENT OF 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 <u>*</u> Wells Antonia			orting	<ul><li>2. Date of Event Requiring</li><li>Statement</li><li>(Month/Day/Year)</li></ul>		3. Issuer Name and Ticker or Trading Symbol MERGE HEALTHCARE INC [MRGE]				
	(Last)	(First)	(Middle)	06/04/2008		4. Relationship of Reporting Person(s) to Issuer		5. If Amendment, Date Original Filed(Month/Day/Year)		
6737 WEST WASHINGTON STREET, SUITE 2250						(Check all applicable)			, , , , ,	
M	ILWAUKI	(Street) EE, WIÂ	53214			Director10% Owner XOfficerOther (give title below) (specify below) President, Merge OEM Division			6. 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 I - Non-Derivative Securities Benefit				neficially Owned	
	itle of Securi str. 4)	ty			2. Amount of Beneficially ( (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	•	
Common Stock			11,347			D	Â			
Restricted Common Stock			53,333			D	Â			
Reminder: Report on a separate line for each class of securities beneficia owned directly or indirectly.					ally SI	EC 1473 (7-02	)			

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#### Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security	2. Date Exercisable and	3. Title and Amount of	4.	5.	6. Nature of Indirect
(Instr. 4)	Expiration Date	Securities Underlying	Conversion	Ownership	Beneficial Ownership
	(Month/Day/Year)	Derivative Security	or Exercise	Form of	(Instr. 5)
		(Instr. 4)	Price of	Derivative	

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	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Derivative Security	Security: Direct (D) or Indirect (I) (Instr. 5)	
Stock Options	(1)	05/11/2008	Common Stock	19,567	\$ 2.75	D	Â
Stock Options	(2)	05/31/2011	Common Stock	25,000	\$ 17.5	D	Â
Stock Options	(3)	10/19/2011	Common Stock	10,000	\$ 17.82	D	Â
Stock Options	(4)	11/16/2012	Common Stock	25,000	\$ 6.34	D	Â
Stock Options	(5)	04/02/2013	Common Stock	35,000	\$ 4.99	D	Â

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
Wells Antonia 6737 WEST WASHINGTON STREET SUITE 2250 MILWAUKEE, WI 53214	Â	Â	President, Merge OEM Division	Â			

### Signatures

/s/ Julie Ann B. Schumitsch, by Power of Attorney for Antonia Wells	06/06/2008
<u>**</u> Signature of Reporting Person	Date

# **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 5(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) Nonqualified replacement options to purchase 9,784 shares of Common Stock as of June 1, 2005 and 9,784 shares of Common Stock as of May 12, 2006.
- (2) Nonqualified options to purchase 6,250 shares of Common Stock vesting on each of June 1, 2005, June 1, 2006, June 1, 2007 and June 1, 2008.
- (3) Nonqualified options to purchase 2,500 shares of Common Stock vesting on each of October 20, 2006, October 20, 2007, October 20, 2008 and October 20, 2009.
- (4) Nonqualified options to purchase 6,250 shares of Common Stock vesting on each of November 17, 2007, November 17, 2008, November 17, 2009 and November 17, 2010.
- (5) Nonqualified options to purchase 8,750 shares of Common Stock vesting on each of April 3, 2008, April 3, 2009, April 3, 2010 and April 3, 2011.

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.