## FORM 4

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

OMB APPR	OVAL
OMB Number:	3235-0287
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 or Section 30(h) of the Investment Company Act of 1940

	e Responses)													
			2. Issuer Name and Ticker or Trading Symbol MEDICAL TRANSCRIPTION BILLING, CORP [MTBC]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X_Officer (give title below) Other (specify below)  General Counsel and Corp Sec					
7 CLYDE	ROAD	(First)		3. Date of Earliest Transaction (Month/Day/Year) 08/09/2017					General C	ounsel and C	orp Sec			
SOMERSI	ET. NJ 088	(Street)		4. If Amendm	ent, Da	ate Origina	al Filed(Mo	nth/Day/Year)		_X_ Form filed	y One Reportin	oup Filing(Che g Person e Reporting Pers		ine)
(City)	,	(State)	(Zip)	Table I - Non-Derivative Securities Acquir					luired, Disposed of, or Beneficially Owned					
1.Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ate, if	3. Transa Code (Instr. 8)	(A	4. Securities Acquir (A) or Disposed of (Instr. 3, 4 and 5)		Owned Follo Transaction(	• /		Ownership Form:	Beneficial	
				(Month/Day/	/Year)	Code	V Ar	nount (A)		(I)		or Indirect (I)	Ownership (Instr. 4)	
Common S	Stock		08/09/2017			M	5,	000 A	\$ 0 (1)	5,000			D	
							form dis	-lava - av	4.					
1. Title of	ve Conversion or Exercise (Month/Day/Year) Execution Date, if Transaction of Code Derivative (Month/Day/Year) any			Derivative Se			ed, Dispos	ed of, or B	eneficially		ontrol num	ıber.		
Derivative Security (Instr. 3)	or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	4. if Transaction Code	5. Non of Der Sec Acc (A) Disp of (Ins	rrants, op Jumber (a ivative (ivative urities juired or posed (ivative down) (iva	ed, Dispos tions, con 5. Date Ex and Expira	ed of, or Bovertible sec ercisable tion Date	7. Title of Undo	or Owned and Amount	8. Price of Derivative Security (Instr. 5)	9. Number of	Owners Form of Derivati Security Direct (I or Indire	Beneficia Ownersh (Instr. 4)
Security	or Exercise Price of Derivative	Date	3A. Deemed Execution Date, any	e.g., puts, cal 4. Transactic Code arr) (Instr. 8)	5. Non of Der Sec Acc (A) Disp of (Ins	rrants, op Jumber ( ivative ( urities juired or posed D) ttr. 3, 4, 5)	ed, Dispos tions, con 5. Date Ex and Expira	ed of, or Bovertible secencisable tion Date y/Year)	7. Title of Undo Securit (Instr. 2	and Amount erlying ies	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction	Owners Form of Derivati Security Direct (I or Indirect)	hip of Indire Beneficia Ownersh (Instr. 4)

### **Reporting Owners**

D II O N /		Relationships			
Reporting Owner Name / Address	Director	10% Owner	Officer	Other	
Patel Shruti H			C1C1-1C		
7 CLYDE ROAD SOMERSET, NJ 08873			General Counsel and Corp Sec		

#### **Signatures**

/s/ Shruti H. Patel	08/10/2017
***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).
- Represents the conversion upon vesting of restricted stock units into common stock on August 9, 2017. These restricted stock units were acquired under the Company's 2014 Equity (1) Incentive Plan, without payment by the reporting person. The remainder of the restricted stock units vest in equal annual installments on each of the next two anniversaries of August 9, 2017.

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.