FORM 4

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

OMB APPROVAL
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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

1. Name and Address of Reporting Person * SNYDER STEPHEN ANDREW				2. Issuer Name and Ticker or Trading Symbol MEDICAL TRANSCRIPTION BILLING, CORP [MTBC]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) _X_ Director				
(Last) (First) (Middle) 7 CLYDE ROAD				3. Date of Earliest Transaction (Month/Day/Year) 03/26/2018								Chie	f Executive	Officer	
(Street) SOMERSET, NJ 08873				4. If Amendment, Date Original Filed(Month/Day/Year)							6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City) (State) (Zip)			Table I - Non-Derivative Securities Acqui							ired, Disposed of, or Beneficially Owned					
(Instr. 3) Date		*****	2A. Deemed Execution Date, any	if C	(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)			Ownership Form:	Beneficial	
			(Month/Day/Year)		Code	V	Amoun	(A) or (D)	Price	(Instr. 3	and 4)		Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)	
Series A Cum Redeemable Perpetual Preferred Stock [MTBCP]		03/26/2018			S		5,450	D	\$ 25.36 (1)	2,800		D			
Series A Cum Redeemable Perpetual Preferred Stock [MTBCP]		03/27/2018			S		2,800	D	\$ 25.19 (2)	0		D			
Reminder: 1	Report on a s	separate line fo		Derivative Secur	ities 2	Acquir	Pers cont the f	ons what ained in form dis	o resp n this f splays	orm are a curre eneficial	not requesting ntly valid	OMB con	formation spond unle trol numbe	ess	1474 (9-02)
1. Title of	2.	3. Transaction	,	e.g., puts, calls, v	varra 5.	nts, op		, conver ate Exer			itle and	8. Price of	9. Number	of 10.	11. Natur
Derivative Security	Conversion or Exercise Price of Derivative Security	Date (Month/Day/		te, if Transaction	Num of Der Sec Acc (A) Dis of (and Expiration Date (Month/Day/Year)		Amo Und Secu	ount of derlying urities tr. 3 and	Derivative Security (Instr. 5)	Derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Owners Form o Derivat Securit Direct or India	ship of Indired Beneficia Ownersh (Instr. 4) D)
				Code V	(A)	(D)	Date Exer		Expirati Date	Title	Amount or Number of Shares				

Reporting Owners

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
SNYDER STEPHEN ANDREW 7 CLYDE ROAD SOMERSET, NJ 08873	X		Chief Executive Officer					

Signatures

/s/ Norman Roth, Attorney-in-Fact for Stephen Andrew Snyder

03/28/2018

**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).
- The price reported in Column 4 is a weighted average price. The shares were sold in multiple transactions at prices ranging from \$25.20 to \$25.75, inclusive. The reporting (1) person undertakes to provide to any security holder of Medical Transcription Billing, Corp. or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the ranges set forth in footnotes (1) and (2) of this Form 4.
- (2) The shares were sold in multiple transactions at prices ranging from \$25.13 to \$25.30, inclusive.

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.