FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO	VAL
OMB Number:	3235-0287
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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

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* BEAN REX C (Last) (First) (Middle) 1600 W. MERIT PARKWAY (Street) SOUTH UT 84095						2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI] 3. Date of Earliest Transaction (Month/Day/Year) 09/04/2003 4. If Amendment, Date of Original Filed (Month/Day/Year)								(Check X	Officer (give title Other (specify below) 6. Individual or Joint/Group Filing (Check Applicable Line)					
JORDAN (City)	(State		T ip)		-										Form filed by More than One Reporting Person					
		Tabl	e I - N	Non-Dei	rivativ	ve S	ecuritie	s Acc	quired,	Dis	posed (of, o	r Bene	eficially	Owned					
[2. Transaction Date (Month/Day/Year		Execution Date,		Transaction Dis		4. Secur Dispose and 5)				Securities Beneficially Owned		Form (D) or Indire	rm: Direct) or direct (I)	7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	Amount		Price	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)		
Common Stoc	08/08/1988			8 08/08/1988				100(1)		D	\$21.9	193,879(1)		D ⁽²⁾						
Common Stock, no par value					08/08/1988		08/08/1988		A		52,584(1)		A	(4)	52,584		D ⁽⁴⁾			
Common Stock, no par value				08/08/1988(1)		1)	08/08/1988		A		13,333(1)		A	(5)	13,333	3 ⁽¹⁾ D ⁽⁵⁾) (5)		
Common Stock, no par value				08/08/1988		08/08/1988		A		12,600(1)		A	(3)	12,600(1)		D (3)				
			Tabl				ecurities alls, warr								d					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		any		4. Transac Code (I 8)	ction	5. Number of Derivative		6. Date Exercisal Expiration Date (Month/Day/Year		ble and 7. 1 Sear) De		7. Title and Amount of Securities Underlying Derivative Security (Ins and 4)		8. Price of Derivative Security (Instr. 5)	9. Numb derivativ Securitie Benefici Owned Followin	re es ally ng	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate Title			Amount or Number of Shares		Reporte Transaci (Instr. 4)	tion(s)			
Nonqualified stock option (right to buy)	\$2.82 ⁽¹⁾	08/08/1988	08/0	8/1988 A			15,625 ⁽¹⁾	15,625 ⁽¹⁾		05/26/1999 0:			Common Stock 15,625		\$2.82 ⁽¹⁾	15,625 ⁽¹⁾		D		
Nonqualified stock option (right to buy)	\$2.16 ⁽¹⁾	08/08/1988	08/0	08/08/1988			15,625 ⁽¹⁾		05/26/200	0 0			mmon itock	15,625(1)	\$2.16 ⁽¹⁾	15,62	5 ⁽¹⁾	D		
Nonqualified stock option (right to buy)	\$3.79 ⁽¹⁾	08/08/1988	08/0	08/1988	A		20,833 ⁽¹⁾		05/23/200	01 0			mmon itock	20,833(1)) \$3.79 ⁽¹⁾ 20,83		33 ⁽¹⁾ D			
Nonqualified stock option (right to buy)	\$12.74 ⁽¹⁾	08/08/1988	08/0	08/1988	A		13,333 ⁽¹⁾		05/23/200	/23/2002 05/		3/2012 Common Stock		13,333(1)	\$12.74 ⁽¹⁾	512.74 ⁽¹⁾ 13,33		D		
Nonqualified stock option (right to buy)	\$13.96 ⁽¹⁾	08/08/1988	08/0	/08/1988 A			20,000(1)		05/22/200	03	5/22/2012		mmon itock	20,000(1)	\$13.96 ⁽¹⁾	20,00	0(1)	D		

Explanation of Responses:

- 1. End of month number reflects split (4 for 3) forward split effective 8/15/03.
- 2. Ownership by Bean Family Investment LLC
- 3. Ownership by Rex Bean Trust (revocable)
- 4. Ownership by Rex & Anita Bean Trust
- 5. Ownership by Rex Bean Cert

Rex C. Bean by Greg Barnett as Atty-in-Fact per Pwr of Atty dtd 9/14/2002, on file with the 09/05/2003 Commission and incorporated herein

^{**} Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.