FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C.	20549
vasimigton,	D.O.	20070

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
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).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

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Name and Address of Reporting Person* Voigt Michel James						2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI] 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify													wner		
(Last) (First) (Middle) 1600 WEST MERIT PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 03/14/2023											X Officer (give title Officer (specify below) CHIEF HUMAN RESOURCES OFFICER					
(Street) SOUTH JORDA	JTH UT 84095				4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)										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)																				
		Tab	le I - Noi	n-Deri	vativ	_			cqu	uired,	Dis	osed o	f, or Be	nefi	cially	Owned	1				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Ye		ar) i	2A. Deemed Execution Date, f any Month/Day/Year)			3. Transaction Code (Instr. 8)				4 and Securi Benefi Owned		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
										Code	v	Amount	(A) o (D)	Pr	ice	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common	Stock, No	Par Value		03/1	03/14/2023					S		2,000	D	\$	68.31	515		D			
Common	ommon Stock, No Par Value															17		I	By 401(k) Plan ⁽¹⁾		
		٦	Гable II -									osed of, onvertil				Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date,	4. Transa Code (8)	ction	5. Number of		6. D	6. Date Exercisal Expiration Date (Month/Day/Year		ole and	7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ount 8	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	e ercisable		xpiration ate	Title	Amo or Nun of Sha	nber						
Non- qualified stock options (right to buy)	\$56.25								03/	19/2022 ⁽	2) 0	3/19/2028	Common Stock	9,6	581		9,681	l	D		
Non- qualified stock options (right to buy)	\$65.03								02/2	28/2023 ⁽	3) 0	2/28/2029	Common Stock	8,0)94		8,094	ı	D		
Non- qualified stock options (right to	\$70.58								02/2	28/2024 ⁽	4) 0	2/28/2030	Common Stock	13,	576		13,570	6	D		

Explanation of Responses:

- 1. Represents plan holdings as of 03/15/2023.
- $2.\ Become \ exercisable \ in \ equal \ annual \ installments \ of \ 25\% \ commencing \ on \ 03/19/2022.$
- 3. Becomes exercisable in equal annual installments of 25% commencing on 02/28/2023.
- $4. \ Become exercisable in equal annual installments of 25\% commencing on 02/28/2024.$

/s/ Brian G. Lloyd, Attorney-

03/15/2023

in-Fact

** 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.