SEC Form 4
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### FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

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			or Section 30(n) of the investment Company Act of 1940	
BARNETT G	lame and Address of Reporting Person* ARNETT GREG L st) (First) (Middle) 00 W. MERIT PARKWAY		2. Issuer Name and Ticker or Trading Symbol <u>MERIT MEDICAL SYSTEMS INC</u> [ MMSI ]     3. Date of Earliest Transaction (Month/Day/Year)     02/04/2004	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title X Other (specify below) Controller
(Street) SOUTH JORDAN (City)	UT (State)	84095 (Zip)	4. If Amendment, Date of Original Filed (Month/Day/Year)	<ul> <li>6. Individual or Joint/Group Filing (Check Applicable Line)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)	
Common Stock, no par value	08/08/1988	08/08/1988	М		4,922	A	(7)	4,922	Ι	by 401(k) Plan <sup>(1)</sup>	

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

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code 8)				6. Date Exerci Expiration Dat (Month/Day/Ye	e	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		(Instr. 4)		
Non- qualified Stock Option (right to buy)	\$2.07 <sup>(2)</sup>	08/08/1988	08/08/1988	М		16,668 <sup>(2)</sup>		02/12/2002 <sup>(3)</sup>	02/12/2011	Common Stock	16,668	\$2.07 <sup>(2)</sup>	16,668 <sup>(2)</sup>	D	
Non- qualified Stock Option (right to buy)	\$7.61 <sup>(2)</sup>	08/08/1988	08/08/1988	М		17,779 <sup>(2)</sup>		12/08/2002 <sup>(4)</sup>	12/07/2011	Common Stock	17,779	\$7.61 <sup>(2)</sup>	17,779 <sup>(2)</sup>	D	
Non- qualified Stock Option (right to buy)	\$9.74 <sup>(2)</sup>	08/08/1988	08/08/1988	М		17,777 <sup>(2)</sup>		02/06/2004 <sup>(5)</sup>	02/06/2013	Common Stock	17,777	\$9.74 <sup>(2)</sup>	17,777 <sup>(2)</sup>	D	
Non- qualified Stock Option (right to buy)	\$21.67	12/13/2003	12/13/2003	М		7,000		12/13/2004 <sup>(6)</sup>	12/13/2013	Common Stock	7,000	\$21.67	7,000	D	

Explanation of Responses:

1. Represent plan holdings as of 02/03/04 per most recent plan statement timely distributed.

2. Numbers reflect (4 for 3) forward split effective 12/03/03.

3. Become exercisable in equal installments of 20A% commencing 02/12/02

4. Become exercisable in equal installments of 20A% commencing 12/08/02

5. Become exercisable in equal installments of 20A% commencing 02/06/04

6. Become exercisable in equal installments of 20A% commercing 12/13/04

7. per 401(k) Plan

### <u>Greg Barnett</u>

\*\* Signature of Reporting Person

<u>02/05/2004</u> Date

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

 $\ast$  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.