FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APP	ROVAL		
IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		
III BEITEI IOIAE OTTITEIXOIIII	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 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person*				2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
STANGER KENT W										2	X Director		10% C	wner		
(Last) (First) (Middle)				_ [,	X Officer (give title below) Other (s											
1600 W MERIT PARKWAY				- 1	3. Date of Earliest Transaction (Month/Day/Year) 06/10/2004							Chief Financial Officer				
(Street) SOUTH JORDAI		Т	84095	- 1	4. If Amendment, Date of Original Filed (Month/Day/Year) 06/14/2004					Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					
(City)	(S	state)	(Zip)	_							Form filed by More than One Reporting Person					
		Tal	ble I - Non-De	rivativ	ve Se	curitie	s Ad	cquired, Di	sposed o	of, or Ben	eficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transc Date (Month/L			•	Execution Date,		Code (Inst	n Dispose	ecurities Acquired (A) osed Of (D) (Instr. 3,			es F ally (I Following (I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
			Code V			Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a	ion(s)		(Instr. 4)				
			Table II - Der (e.ɑ					quired, Dis s, options,				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion Oate (Month/Day/Year) 3A. Democrative Security 3. Transaction Date Execution Date if any (Month/Day/Year)			4. Trans Code	4. 5. Nu Transaction of Code (Instr. Deriv		oer ive ies ed ed ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amour of Securities Underlying Derivative Securit (Instr. 3 and 4)		nt 8. Price of Derivative Security		Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					
Non- qualified stock options (right to buy)	\$13.81	06/10/2004		A		6,000		06/10/2004 ⁽¹⁾	06/10/2014	Common Stock	6,000	\$0 ⁽²⁾	6,000	D		
Non- qualified stock options (right to	\$13.81	06/10/2004		A		15,000		06/10/2004	06/10/2014	Common Stock	15,000	\$0 ⁽²⁾	15,000	D		

Explanation of Responses:

- 1. Initially reported in error as 12/10/04.
- 2. Initially reported in error.

Kent Stanger

02/13/2008

** 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.