

OMB APPROVAL	
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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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

1. Name and Address of Reporting Person* <u>Lampropoulos Justin J.</u> _____ (Last) (First) (Middle) 1600 WEST MERIT PARKWAY _____ (Street) SOUTH UT 84095 _____ (City) (State) (Zip)			2. Issuer Name and Ticker or Trading Symbol <u>MERIT MEDICAL SYSTEMS INC [MMSI]</u> _____]			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _____ 10% Owner _____ Officer (give title below) _____ Other (specify below) _____ X PRESIDENT, EMEA		
			3. Date of Earliest Transaction (Month/Day/Year) 03/19/2021			6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person		
			4. If Amendment, Date of Original Filed (Month/Day/Year)					

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)	3. Transaction Code (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) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			
Common Stock, No Par Value								2,343	D	

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		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) (Instr. 4)	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
Non-qualified stock options (right to buy)	\$56.25	03/19/2021		A		9,681		03/19/2022 ⁽¹⁾	03/19/2028	Common Stock	9,681	\$0	9,681	D	
Non-qualified stock options (right to buy)	\$16.05							01/28/2017 ⁽²⁾	01/28/2023	Common Stock	20,000		20,000	D	
Non-qualified stock options (right to buy)	\$28.2							04/14/2018 ⁽³⁾	04/14/2024	Common Stock	25,000		25,000	D	
Non-qualified stock options (right to buy)	\$44.8							03/02/2019 ⁽⁴⁾	03/02/2025	Common Stock	20,000		20,000	D	
Non-qualified stock options (right to buy)	\$55.73							03/01/2020 ⁽⁵⁾	03/01/2026	Common Stock	30,000		30,000	D	
Non-qualified stock options (right to buy)	\$37.71							02/26/2021 ⁽⁶⁾	02/26/2027	Common Stock	16,722		16,722	D	

Explanation of Responses:

- Become exercisable in equal annual installments of 25% commencing on 03/19/2022.
- Becomes exercisable in equal annual installments of 20% commencing on 01/28/2017.
- Becomes exercisable in equal annual installments of 20% commencing on 04/14/2018
- Becomes exercisable in equal annual installments of 20% commencing on 03/02/2019.
- Becomes exercisable in equal annual installments of 20% commencing on 03/01/2020.
- Becomes exercisable in equal annual installments of 25% commencing on 02/26/2021.

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.