

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL	
OMB Number:	3235-0362
Estimated average burden hours per response:	1.0

- Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
- Form 3 Holdings Reported.
- Form 4 Transactions Reported.

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* <u>STANGER KENT W</u> (Last) (First) (Middle) <u>1600 W MERIT PARKWAY</u> (Street) <u>SOUTH JORDAN UT 84095</u> (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) <input checked="" type="checkbox"/> Director 10% Owner Officer (give title below) Other (specify below)
	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) <u>12/31/2016</u>	
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 at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
				Amount	(A) or (D)	Price			
Common Stock, No Par Value							42,250	I	By 401(k) plan ⁽¹⁾
Common Stock, No Par Value							4,271 ⁽²⁾	D	
Common Stock, No Par Value							29,524	I	Family Limited Partnership ⁽³⁾
Common Stock, No Par Value	12/30/2016		G	2,812	D	(4)	411,534	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)	
					(A)	(D)	Date Exercisable	Expiration Date						Title
Non-qualified stock options (right to buy)	\$13.75						08/11/2012 ⁽⁵⁾	08/11/2018	Common Stock		64,000		D	
Non-qualified stock options (right to buy)	\$12.06						10/04/2015 ⁽⁶⁾	10/04/2021	Common Stock		2,000		D	
Non-qualified stock options (right to buy)	\$19.72						05/02/2017 ⁽⁷⁾	05/02/2023	Common Stock		9,375		D	
Non-qualified stock options (right to buy)	\$18.8						05/26/2017 ⁽⁸⁾	05/26/2023	Common Stock		25,000		D	

Explanation of Responses:

- Represents plan holdings as of 12/31/16.
- Employee stock purchase plan as of 12/31/16.
- This report shall not be deemed an admission that the reporting person is the beneficial owner of the securities held by K.W.S. Properties L.C.
- This is a gift.

5. Becomes exercisable in equal annual installments of 20% commencing on 08/11/2012.
6. Becomes exercisable in equal annual installments of 20% commencing on 10/04/2015.
7. Becomes exercisable in equal annual installments of 20% commencing on 05/02/2017.
8. Becomes exercisable in equal annual installments of 20% commencing on 05/26/2017.

Kent W. Stanger

02/01/2017

** 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.