

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person * <u>Millner F. Ann</u> _____ (Last) (First) (Middle) <u>1600 WEST MERIT PARKWAY</u> _____ (Street) <u>SOUTH 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. Date of Earliest Transaction (Month/Day/Year) <u>05/31/2019</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 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								8,298	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					
Non-qualified stock options (right to buy)	\$21.98							07/16/2016 ⁽¹⁾	07/16/2022	Common Stock	8,492	8,492	D	
Non-qualified stock options (right to buy)	\$18.8							05/26/2017 ⁽²⁾	05/26/2023	Common Stock	15,000	15,000	D	
Non-qualified stock options (right to buy)	\$34.4							05/24/2018 ⁽³⁾	05/24/2024	Common Stock	20,000	20,000	D	
Non-qualified stock options (right to buy)	\$50.5							06/07/2019 ⁽⁴⁾	06/07/2025	Common Stock	25,000	25,000	D	
Non-qualified stock options (right to buy)	\$52.17							05/24/2020 ⁽⁵⁾	05/24/2026	Common Stock	13,750	13,750	D	
Non-qualified stock options (right to buy)	\$52.17	05/31/2019		A		7,500		05/31/2020 ⁽⁶⁾	05/31/2026	Common Stock	7,500	\$0	7,500	D

Explanation of Responses:

- Becomes exercisable in equal annual installments of 20% commencing 07/16/2016.
- Becomes exercisable in equal annual installments of 20% commencing 05/26/2017.
- Becomes exercisable in equal annual installments of 20% commencing 05/24/2018.
- Becomes exercisable in equal annual installments of 20% commencing 06/07/2019.

- 5. Becomes exercisable in equal annual installments of 33% commencing 05/24/2020.
- 6. Becomes exercisable in equal annual installments of 33% commencing 05/31/2020.

Remarks:

Brian G. Lloyd, Attorney-in-Fact

06/04/2019

** 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.