FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

	tion 1(b).	140. 500		Filed							ies Exchang npany Act o			4		nours	perio	esponse:	0.5
Name and Address of Reporting Person*     Evans Stephen C.				2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [ MMSI ]								(Che	eck all app X Direc	licable) tor	ng Pe	erson(s) to Is	wner		
(Last) (First) (Middle) 1600 WEST MERIT PARKWAY			3. Date of Earliest Transaction (Month/Day/Year)									Office below	er (give title		Other (s	specify			
(Street)					05/24/2022  4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
SOUTH	N UI	r 8	4095											Line	X Form	filed by Mo		porting Pers an One Rep	
(City)	(St	ate) (Z	Zip)												reisc	)			
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	3ene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Execution Date		Date,	3. Transaction Code (Instr. 5) 4. Securities Acquired Disposed Of (D) (Instr. 5)					d Securit Benefic Owned	Securities Beneficially Owned Following		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	or I	Price		ed action(s) 3 and 4)			(Instr. 4)
Common Stock, No Par Value 05/				05/24/	/2022				A		3,050(1)	A	A	\$ <mark>0</mark>	5,964			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)	ive Conversion Date Execution Date, y or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	r osed ) r. 3, 4	Expiration I e (Month/Day		te	7. Title and Amount of Securities Underlying Derivative Security (Insti 3 and 4)		(	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

## **Explanation of Responses:**

1. The reported transaction involved the reporting person's receipt of a grant of 3,050 restricted stock units (RSUs) under the Merit Medical Systems, Inc. 2018 Long-Term Incentive Plan. The RSUs vest on May 24, 2023. Vesting of the RSUs is subject to continued service to the issuer through the vesting date.

/s/ Brian G. Lloyd, Attorney-

05/26/2022

in-Fact

\*\* 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.