FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to

OMB APPROVAL										
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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* STILLABOWER MICHAEL E					2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC MMSI							ISI (Ch	elationship of Reporting F eck all applicable)		g Pers	10% Owner Other (specify			
(Last) (First) (Middle) 1600 W. MERIT PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 06/27/2007								below)			below)			
(Street) SOUTH JORDAN	N U	Г	84095				4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)																
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execution Date,		Code (Instr. 5)			Beneficia	es Form ally (D) o Following (I) (Ir		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)					
							Code	٧	Amount	(A) or (D)	Price	Transact (Instr. 3 a	tion(s)			(111541. 4)			
	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 D if any (Month/Day/	ution Date, Tran			5. Number of Expiration (Month/Day Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Date				8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(: (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisabl		xpiration ate	Title	Amount or Number of Shares						
Non- qualified stock options (right to buy)	\$12.13	06/27/2007			A		15,000		(1)	0	6/27/2014	Common Stock	15,000	\$0	15,000)	D		

Explanation of Responses:

1. Become exercisable in equal annual installments of 20% commencing 06/27/08

Rashelle Perry, Attorney-in-

Fact

** Signature of Reporting Person

Date

06/29/2007

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.