FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB AP | PPROVAL |
|-------------|----------|
| OMB Number: | 3235-028 |
| 1 – | |

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

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

| Name and Address of Reporting Person* STANGER KENT W | | | | | | 2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI] | | | | | | | | | ck all app | olicable) | ting P | erson(s) to 10% | Issuer Owner |
|--|---|--|------------------------------------|---|---------------------------------|--|---|---|---|---------------------|------------------------|--|--------------------------|---|---|--|-------------------------------|---|---------------------------------------|
| (Last) (First) (Middle) 1600 W MERIT PARKWAY | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/31/2003 | | | | | | | | X | belov | • | | Othe below al Officer | , | | |
| (Street) SOUTH JORDAN | | | 34095 | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 12/31/2003 | | | | | | Individual or Joint/Group Filing (Check Applic Line) X Form filed by One Reporting Person Form filed by More than One Reportin Person | | | | | rson | | |
| (City) | (St | | Zip) | | <u> </u> | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) | | | 2. Transacti Date (Month/Day | on | n 2A. Deemed Execution Date, | | | | Of, or Beneficial Acquired (A) or (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported | | 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 | | Transac (Instr. 3 | tion(s) | | | (|
| Common Stock, No Par Value | | | 12/31/2003 | | | | S | | 5,000 | D | \$22.50 |)18 | 48,001 ⁽²⁾⁽³⁾ | | | I ⁽¹⁾ | Family Ltd. Partnership | | |
| Common | Stock No P | ar Value | | 12/31/20 | 003 | | | | J | | 0 | A | (2) | | 465,1 | .16 ⁽¹⁾⁽²⁾ | | D | |
| | | Та | ble I | | | | | | | | posed of, convertib | | | | wned | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execu if any | eemed ution Date, h/Day/Year) | 4. Transa Code (8) | (Instr. | 5. Numof of Deriv. Secun Acqu (A) or Dispo of (D) (Instr. and 5 | ative rities ired osed . 3, 4 | Expii (Mon | ration I hth/Day | | 7. Title Amour Securi Underl Deriva Securi and 4) | nt of ties ying | De Se (In: | Price of rivative curity str. 5) | 9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4) | e S Illy | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4 | Beneficial Ownership (Instr. 4) |

Explanation of Responses:

- 1. This Amendment is filed to correct the reference to the ownership form of the shares sold in the subject transaction. The referenced shares were sold by a family limited partnership of which the reporting person holds an indirect interest.
- 2. This Amendment is also filed to correct a computational error in the number of shares previously reported as being held, directly or indirectly, by the reporting person following the transactions originally
- 3. 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 LC.

Kent W. Stanger 05/19/2014

** 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.