## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	3	,	

OMB APPROVAL								
OMB Number:	3235-028							
Estimated average b	urden							

0.5

hours per response:

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

					OI	Secu	011 30(11)	oi trie	investment c	company /	ACL OI	1940						
Name and Address of Reporting Person*     Millner F. Ann						2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [ MMSI								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Willier F. Allii				11	]								X Director			10% Ov	vner	
(Last) (First) (Middle)			2 Put (Faliant Turns tile (Marth (Parker))						_	Officer ( below)	(give title		Other (s below)	pecify				
1600 WEST MERIT PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 05/24/2017													
(Street)				4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
SOUTH UT 84095 JORDAN												X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	tate)	(Zip)		-							Person						
		Tal	ble I - Noi	n-Deriv	/ativ	e Se	curitie	s Ad	quired, D	ispose	d of,	or Ben	eficiall	y Owned				
1. Title of Security (Instr. 3)  2. Transi Date				2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Disposed Code (Instr. 5)			ities Acquired (A) o d Of (D) (Instr. 3, 4 a		5. Amour Securitie Beneficia Owned F	s ally ollowing	Form	: Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
									Code V	Amou	ınt	(A) or (D)	Price	Reported Transacti (Instr. 3 a	ion(s)			(Instr. 4)
									uired, Dis s, options					Owned				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, Transaction or Exercise (Month/Day/Year) if any Code (Instr.					ate	of Securities		es J Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		Beneficial Ownership (Instr. 4)				
				c	Code	v	(A)	(D)	Date Exercisable	Expirati Date		Γitle	Amount or Number of Shares					
Non- qualified stock options (right to buy)	\$21.98								07/16/2016 <sup>(1)</sup>	07/16/20	022	Common Stock	21,233		21,233	3	D	
Non- qualified stock options (right to buy)	\$18.8								05/26/2017 <sup>(2)</sup>	05/26/20	023	Common Stock	25,000		25,000	)	D	
Non- qualified stock options (right to buy)	\$34.4	05/24/2017			A		25,000		05/24/2018 <sup>(3)</sup>	05/24/20	024	Common Stock	25,000	\$0	25,000	)	D	

## **Explanation of Responses:**

- 1. Becomes exercisable in equal annual installments of 20% commencing 7/16/2016.
- 2. Becomes exercisable in equal annual installments of 20% commencing 5/26/2017.
- 3. Becomes exercisable in equal annual installments of 20% commencing 5/24/2018.

Brian G. Lloyd, Attorney-in-Fact

05/26/2017

\*\* Signature of Reporting Person

Date

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly.$ 

- \* 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.