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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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1. Name and Address of Reporting Person [*] PERRY RASHELLE						2. Issuer Name and Ticker or Trading Symbol <u>MERIT MEDICAL SYSTEMS INC</u> [MMSI]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify					
(Last) (First) (Middle) 1600 W. MERIT PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 12/18/2004								X below) below) below) Chief Legal Officer					
(Street) SOUTH JORDAN UT			84095	4.1	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) (State) (Zip)			(Zip)																
		Ta	ble I - Nor						-	Dis	1			-					
Dat				2. Trans Date (Month/		- 1	2A. Deemed Execution Date, if any (Month/Day/Year		ar) Code (li	nstr.	Disposed 5)	ies Acquired (A) or Of (D) (Instr. 3, 4 and (A) or Brico		5. Amount of Securities Beneficially Owned Following Reported Transaction(s)		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of ndirect Beneficial Ownership (Instr. 4)	
Common Stock, No Par Value									Code	v	Amount		Price	(Instr. 3 a	(Instr. 3 and 4)			401(k)	
Table II - Deriva						ve Securities Acquired, Disposed of, or Beneficially Owned s, calls, warrants, options, convertible securities)											1	plan ⁽¹⁾	
1. Title of Derivative Security (Instr. 3)	ive Conversion Date y or Exercise (Month/Day/Year)		3A. Deemed Execution D if any	3A. Deemed 4. Execution Date, Tr		ction Instr.	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 Amoun of Securities Underlying Derivative Securit (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	Title	Amount or Number of Shares		. ,				
Non- qualified stock options (right to buy)	\$4.06								08/06/2002 ⁽	(2)	08/06/2011	Common Stock	16,668		16,66	8	D		
Non- qualified stock options (right to buy)	\$7.61								12/08/2002 ⁽	(3)	12/08/2011	Common Stock	17,779		17,77	9	D		
Non- qualified stock options (right to buy)	\$9.74								02/06/2004	(4)	02/06/2013	Common Stock	17,777		17,777		D		
Non- qualified stock options (right to buy)	\$21.67								12/13/2004	(5)	12/13/2013	Common Stock	7,000		7,000)	D		
Non- qualified stock options (right to buy)	\$13.81								12/10/2004	4	06/10/2014	Common Stock	3,000		3,000)	D		
Non- qualified stock option (right to buy)	\$15.03	12/18/2004			A		10,000		12/18/2004	4	12/18/2014	Common Stock	10,000	\$15.03	10,00	0	D		

Explanation of Responses:

1. Represent plan holdings as of 06/10/04 based upon most recent plan statement timely distributed

2. Becomes exercisable in equal annual installments of 20% 08/06/02

3. Becomes exercisable in equal annual installments of 20% commencing 12/08/02

4. Becomes exercisable in equal annual installments of 20% commencing 02/06/04

Rashelle Perry

** Signature of Reporting Person

<u>12/18/200</u>4

Date

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

 \ast 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.