FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANG	ES IN BEN	IEFICIAL (OWNERSHI	Ρ

OMB APPRO	JVAL				
OMB Number:	3235-0287				
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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

					U	Jecu	1011 30(11)	OI LITE	invesimen	CUI	ipariy Act c	11340							
1. Name and Address of Reporting Person* ANDERSON A SCOTT				2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI] Street Message 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner															
(Last) (First) (Middle) 1600 WEST MERIT PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 05/24/2017 Officer (give title below) Other (specify below)										pecify					
(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									
(City) (State) (Zip)					Person														
		Tal	ble I - Nor	n-Deriv	vativ	e Se	curitie	s Ac	cquired,	Dis	osed of	, or Ben	eficia	lly Own	ed				
		Date	Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Disposed (Code (Instr. 5)		ies Acquired (A) or Of (D) (Instr. 3, 4 and		nd Securities Beneficially Owned Follo Reported		y (D) or lowing (I) (In:		: Direct I Indirect I str. 4) (7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	V	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)					
Common	Stock, No 1														6,40	00		D	
			Table II -						luired, D s, option					y Owne	d				
Derivative Conversion Date		3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day)	4. Transaction Code (Instr.		5. Number		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		Derivat Securit	ive of S	D. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	ly	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	Amoun or Numbe of Shares						
Non- qualified stock options (right to buy)	\$12.91								05/23/2013	(1)	05/23/2019	Common Stock	4,000			4,000		D	
Non- qualified stock options (right to buy)	\$9.95								05/22/2014	(2)	05/22/2020	Common Stock	5,000			10,000)	D	
Non- qualified stock options (right to buy)	\$13.99								06/11/2015	(3)	06/11/2021	Common Stock	5,000			15,000		D	
Non- qualified stock options (right to buy)	\$20.27								05/22/2016	(4)	05/22/2022	Common Stock	25,000	0		25,000)	D	
Non- qualified stock options (right to buy)	\$18.8								05/26/2017	(5)	05/26/2023	Common Stock	25,000			25,000)	D	
Non- qualified stock options (right to	\$34.4	05/24/2017			A		25,000		05/24/2018	(6)	05/24/2024	Common Stock	25,000	\$0		25,000)	D	

Explanation of Responses:

- 1. Becomes exercisable in equal annual installments of 20% commencing 05/23/2013.
- 2. Becomes exercisable in equal annual installments of 20% commencing 05/22/2014.
- 3. Becomes exercisable in equal annual installments of 20% commencing 06/11/2015.
- $4.\ Becomes\ exercisable\ in\ equal\ annual\ installments\ of\ 20\%\ commencing\ 05/22/2016.$
- 5. Becomes exercisable in equal annual installments of 20% commencing 05/26/2017.

 $6. \ Becomes \ exercisable \ in \ equal \ annual \ installments \ of \ 20\% \ commencing \ 05/24/2018.$

Brian G. Lloyd, Attorney-in-Fact

** Signature of Reporting Person

05/26/2017

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.