OMB APPROVAL

5. Relationship of Reporting Person(s) to Issuer

CFO AND TREASURER

6. Individual or Joint/Group Filing (Check Applicable Line)

Form filed by One Reporting Person

Form filed by More than One Reporting Person

6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)

D

D

D D

I

7. Nature of Indirect Beneficial Ownership (Instr. 4)

By

401(k)

Plan⁽²⁾

(Check all applicable) Director

Officer (give title

5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)

4,343

2,343

4,343

2,343

2,905.578

OMB Number: 3235-0									
Estimated average burden									
hours per response:	0.5								

10% Owner

below)

Other (specify

I	FORM	UNITE	D STA	TES	SECURITIE Washin	SAN gton, D.			IGE C	OMMIS	SIOI	
Section	his box if no l 16. Form 4 o ons may conti on 1(b).	STA		ed pursua	F CHANGE ant to Section 16(a ection 30(h) of the) of the s	Securi	ties Exchang	e Act of 1	_	IIP	
1. Name and Parra Ra		f Reporting Persor	۱*		2. Issuer Name and Ticker or Trading Symbol <u>MERIT MEDICAL SYSTEMS INC</u> [MMSI]							
(Last) 1600 WE	`	First) T PARKWAY	(Middle)			te of Earliest Trans 8/2021	action (I	Month	'Day/Year)		X	belo
(Street) SOUTH JORDAN	84095		4. If A	mendment, Date c	of Origina	al Fileo	d (Month/Day	r/Year)	6. Indi Line) X	vidual For For		
(City)	(5	State)	(Zip)									Per
1. Title of S	ecurity (Ins		ble I - No	2. Transa Date (Month/E	ction	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed O	d (A) or	5. Am Secur Benef	
							Code	v	Amount	(A) or (D)	Price	Repo Tran (Inst
Common S	Stock, No	Par Value		09/08	/2021		М		2,000	Α	\$44.8	
Common S	Stock, No	Par Value		09/08	/2021		S		2,000	D	\$72.01 ⁽¹⁾	
Common S	Par Value	09/09	/2021		М		2,000	A	\$44.8			
Common S	Stock, No	Par Value		09/09	/2021		S		2,000	D	\$72	
Common S	Stock, No	Par Value										2
			Table II			ecurities Acqualls, warrants						wne
1. Title of	2.	3. Transaction	3A. Deen	ned	4.	5. Number 6	6. Date E	xercis	able and	7. Title an	d Amount 8	Price

	(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 Date, if any (Month/Day/Year)	4. Transa Code (8)	action (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 Amount of Securities Underlying Derivative Security (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)	\$44.8	09/08/2021		М			2,000	03/02/2019 ⁽³⁾	03/02/2025	Common Stock	2,000	\$0	6,000	D	
Non- qualified stock options (right to buy)	\$44.8	09/09/2021		М			2,000	03/02/2019 ⁽³⁾	03/02/2025	Common Stock	2,000	\$0	4,000	D	
Non- qualified stock options (right to buy)	\$28.2							04/14/2018 ⁽⁴⁾	04/14/2024	Common Stock	2,000		2,000	D	
Non- qualified stock options (right to buy)	\$55.73							03/01/2020 ⁽⁵⁾	03/01/2026	Common Stock	30,000		30,000	D	
Non- qualified stock options (right to buy)	\$37.71							02/26/2021 ⁽⁶⁾	02/26/2027	Common Stock	16,722		16,722	D	

	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 Date, if any (Month/Day/Year)	4. Transa Code (8)		of Deri Sec Acq (A) o Disp of (E (Inst	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			7. Title and Amount of Securities Underlying Derivative Security (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)	\$56.25							03/19/2022 ⁽⁷⁾	03/19/2028	Common Stock	9,681		9,681	D	

Explanation of Responses:

1. The price reported in Column 4 of Table 1 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$72.00 to \$72.03, inclusive. The Reporting Person undertakes to provide to Merit Medical Systems, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.

2. Represents plan holdings as of 09/09/2021.

3. Becomes exercisable in equal annual installments of 20% commencing 03/02/2019.

4. Becomes exercisable in equal annual installments of 20% commencing 04/14/2018.

5. Becomes exercisable in equal annual installments of 20% commencing 03/01/2020.

6. Becomes exercisable in equal annual installments of 25% commencing 02/26/2021.

7. Becomes exercisable in equal annual installments of 25% commencing 03/19/2022.

/s/ Brian G. Lloyd, Attorney-in-09/10/2021

<u>Fact</u>

** Signature of Reporting Person 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.