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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

OMB APPROVAL

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

1. Name and Add Stephens M	lress of Reporting Per <mark>lartin R</mark>	rson*	2. Issuer Name and Ticker or Trading Symbol <u>MERIT MEDICAL SYSTEMS INC</u> [MMSI]		ionship of Reporting Person(s) to Issuer all applicable) Director 10% Owner			
(act)	(First) (Middle)		1	X	Officer (give title below)	Other (specify below)		
(Last) (First) (Middle) 1600 W. MERIT PARKWAY			3. Date of Earliest Transaction (Month/Day/Year) 12/15/2004	VP of Sales				
(Street) SOUTH JORDAN	UT	84095	4. If Amendment, Date of Original Filed (Month/Day/Year) 03/30/2005		idual or Joint/Group Filin Form filed by One Rep Form filed by More tha	porting Person		
(City)	(State)	(Zip)			Person			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Code (4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
			Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock, No Par Value								7,400 ⁽⁴⁾	D	
Common Stock, No Par Value								817	I	By 401 (k) Plan ⁽¹⁾
Common Stock, No Par Value								155	D ⁽³⁾	

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)		5. Numl of Derivati Securiti Acquire (A) or Dispose of (D) (I 3, 4 and	ive ies ed ed nstr.	Expiration Date o (Month/Day/Year) U		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)	\$14.48							07/14/2005 ⁽²⁾	07/14/2009	Common Stock	5,000		5,000	D	
Non- qualified stock options (right to buy)	\$15.03	12/18/2004		A		20,000		12/18/2004	12/18/2014	Common Stock	20,000	\$15.03	20,000	D	

Explanation of Responses:

1. Represents shares held by the Merit Medical Systems, Inc. 401(k) Profit Sharing Plan and Trust for the Benefit of the reporting person as of 03/30/05.

2. The option vests in equal annual installments of 1,000 shares, commencing on July 14, 2005 and continuing through July 14, 2009.

3. (Employee Stock Purchase Plan) as of 01/26/05

4. Amendment being filed to correct transaction already filed



<u>12/18/2004</u> Date

** Signature of Reporting Person

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.