FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	DC	20549
vvasiliigtoii,	D.C.	20048

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average b	ourden							
- 1	hours per response.	0.5							

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	Sec	tion 30(I	1) of th	e Investmen	t Co	mpany Act	of 194	)						
1. Name and Address of Reporting Person* ANDERSON A SCOTT					2. Issuer Name and Ticker or Trading Symbol  MERIT MEDICAL SYSTEMS INC [ MMSI ]  Structure   MSI   MSI   Structure   MSI   MSI														
(Last) (First) (Middle) 1600 WEST MERIT PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 05/24/2022													pecity	
					03/	/24/.	2022												
(Street) SOUTH JORDAN	N U	Т	84095		4. 1	. 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)	(S	tate)	(Zip)										1 613011						
		Tab	ole I - Nor	า-Deriv	ative	e Se	curiti	es A	cquired,	Dis	posed c	f, or	Bene	ficia	ly Owned	l			
1. Title of Security (Instr. 3)		2. Transa Date (Month/I			2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			Beneficia	es ally <sup>F</sup> ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) or (D) P		Price	Transact (Instr. 3	ion(s)			(Instr. 4)
Common	Stock, No	Par Value		05/24	05/24/2022						3,050	(1) A		\$ <mark>0</mark>	50,	,135	D		
		-							quired, D						/ Owned				
1. Title of Derivative Security (Instr. 3)  1. Title of Security (Instr. 3)  2. Conversion Date (Month/Day/Year)  3. Transaction Date Execution Date, if any (Month/Day/Year)			d 4 Date, 1	4. Transaction Code (Instr. 8)		5. Number 6. I		6. Date Exe	options, converti		7. Title and Amo of Securities Underlying Derivative Secur (Instr. 3 and 4)		nount	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	or No of	ımber					
Non- qualified stock options (right to buy)	\$18.8								05/26/2017 <sup>(</sup>	2) (	05/26/2023	Comn		,000		5,000	)	D	
Non- qualified stock options (right to buy)	\$34.4								05/24/2018 <sup>(</sup>	3) (	05/24/2024	Comn		),000		10,000		D	
Non- qualified stock options (right to buy)	\$50.5								06/07/2019 <sup>(</sup>	4) (	06/07/2025	Comn		5,000		25,000	0	D	
Non- qualified stock options (right to buy)	\$52.17								05/24/2020 <sup>(</sup>	5) (	05/24/2026	Comn Stoc		3,750		13,750	0	D	
Non- qualified stock options (right to	\$52.17								05/31/2020(	6) (	05/31/2026	Comn		,500		7,500	)	D	

## Explanation of Responses:

- 1. The reported transaction involved the reporting person's receipt of a grant of 3,050 restricted stock units (RSUs) under the Merit Medical Systems, Inc. 2018 Long-Term Incentive Plan. The RSUs vest on May 24, 2023. Vesting of the RSUs is subject to continued service to the issuer through the vesting date.
- 2. Becomes exercisable in equal annual installments of 20% commencing 05/26/2017.
- 3. Becomes exercisable in equal annual installments of 20% commencing 05/24/2018.
- 4. Becomes exercisable in equal annual installments of 20% commencing 06/07/2019.
- 5. Becomes exercisable in equal annual installments of 33% commencing 05/24/2020.
- $6. \ Becomes \ exercisable \ in \ equal \ annual \ installments \ of \ 33\% \ commencing \ 05/31/2020.$

/s/ Brian G. Lloyd, Attorney-

05/26/2022

\*\* Signature of Reporting Person

\*\* 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.