FORM 4

Section 16. Form 4 or Form 5 obligations may continue. See

Instruction 1(b).

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	STATEMENT OF CHANGES IN BENEFICIAL	OWNERSHIP
Section 10. Form 4 or Form 5		

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person* STANGER KENT W						2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI]								neck all app	licable) tor	ng Pers	son(s) to Iss 10% Ov	ner
(Last) 1600 W	Last) (First) (Middle) 600 W MERIT PARKWAY				3. Date of Earliest Transaction (Month/Day/Year) 12/28/2005								X Officer (give title below) Other (specification) Chief Financial Officer				pecity	
(Street) SOUTH JORDAN (City)			84095 (Zip)			4. If Amendment, Date of Original Filed (Month/Day/Year) 12/30/2005								i. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Tab	le I - Non	-Deriv	ative	e Se	curities	s Ac	quired,	Dis	posed c	of, or Be	neficia	lly Owne	d			
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Dat		Date,	Date, Transaction Code (Instr.					Benefi	es Form ally (D) of Following (I) (Ir		n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	v	Amount	(A) oi (D)	Price	Transa (Instr.	tion(s)			(IIISU. 4)	
	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)	vative Conversion Date Execution Date, urity or Exercise (Month/Day/Year) if any		ate,	4. Transaction Code (Instr. 8)				6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amour 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 Exercisab		Expiration Date	Title	Amount or Number of Shares					
Non- qualified stock options (right to buy)	\$12.14	12/28/2005			A		20,000		12/28/200	5 1	.2/28/2015	Common Stock	20,000	\$12.14	20,000	₎ (1)	D	

Explanation of Responses:

1. Reporting owner owns no other derivative securities containing identical terms to those in this reported transaction

Kent Stanger 12/30/2005

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.