FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	S IN BENEFI	CIAL OWN	IERSHIP

omb APPROVAL

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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

1. Name and Address of Reporting Person* WEINTRAUB B LEIGH						2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI]										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director Officer (give title Other (specify below)					
(Last) 1600 W	(F MERIT PA	irst) RKWAY	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) COO 06/10/2004								00	below)							
(Street) SOUTH JORDAI	N U	Т	84095		4. 1	4. If Amendment, Date of Original Filed (Month/Day/Year)									ividual or Joint/Group Filing (Check App Form filed by One Reporting Person Form filed by More than One Report			ı			
(City)	(S	tate)	(Zip)												Persor	l					
		Tal	ole I - Nor	n-Deriv	ativ	e Se	curitie	s A	cquired, I	Disp	osed o	f, or	Bene	eficially	y Owned						
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		e, Transaction Disposed Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		5. Amount of Securities Beneficially Owned Following Reported		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)						
									Code	v	Amount	{	A) or D)	Price	Transact (Instr. 3 a	ion(s)			` ′		
	stock, no p					_						_				392		D			
Common	stock, no p	ar value													1,1	30(1)	L	D			
Common	stock, no p	ar value													6,8	04 ⁽⁶⁾		I	by 401(k) plan		
									quired, Di s, option						Owned						
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. Transaction Code (Instr. 8)		n of E		Expiration D	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
				C	Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	0 N 0	Amount or Jumber of Shares							
Non- qualified stock options (right to buy)	\$7.61								12/08/2002 ⁽²	2) 1	2/08/2011	Comm		32,556		35,55	66	D			
non- qualified stock options (right to buy)	\$2.07								02/12/2002 ⁽³	3) 0	2/12/2011	Comm		33,335		33,33	5	D			
non- qualified stock options (right to buy)	\$9.74								02/06/2004 ⁽⁴	4) 0	2/06/2013	Comm		35,556		35,55	66	D			
non- qualified stock options (right to buy)	\$21.67								12/13/2004 ⁽⁵	5) 1	2/03/2013	Comm		4,000		14,00	0	D			
Non- qualified stock option (right to buy)	\$2.36								04/23/2000 ⁽⁾	7) 1	0/23/2004	Comm		2,863		2,863	3	D			
Non- qualified stock option	\$13.81	06/10/2004			A		6,000		12/10/2004	0	6/10/2014	Comm		6,000	\$13.81	6,000	0	D			

Explanation of Responses:

- 1. Emplyee stock purchase
- 2. Become exercisable in equal annual installments of 20% commencing 12/08/02
- 3. Become exercisable in equal annual installments of 20% commencing $02/12/02\,$
- 4. Become exercisable in equal annual installments of 20% commencing 02/06/04
- 5. Become exercisable in equal annual installments of 20% commencing 12/13/04
- 6. Represents plan holdings as of 06/10/04 based upon most recent plan statement timely distributed.
- 7. Become exercisable in equal annual installments of 20% 04/23/00

B leigh Weintraub

06/11/2004

** Signature of Reporting Person

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.