FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

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	OMB APP	ROVAL						
	OMB Number:	3235-0287						
1	Estimated average hurden							

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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 Section 30(h) of the Investment Company Act of 1940

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Name and Address of Reporting Person* Millner F. Ann					2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [MMSI										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)	,	irst) ΓΡΑΡΚWΑΥ	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 05/18/2023											r (give title		Other (specify below)		
1600 WEST MERIT PARKWAY				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)						
(Street) SOUTH JORDA		Т	84095			Line) X Form filed by One Re Form filed by More the Person									•						
(City)	(S	state)	(Zip)		$ _{\Box}$	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In															
		Tab	le I - No	n-Deriv	ative	Se	curiti	es A	cau	ired. D	isp	osed o	of. or	3en	eficial	ly Owne					
1. Title of Security (Instr. 3)		2. Transa Date (Month/E	action 2A Ex Day/Year) if a		A. Deemed Execution Date, f any Month/Day/Year		te,	3. Transaction Code (Instr.		4. Secur	ities Acquired (A) of Of (D) (Instr. 3, 4		d (A) or	5. Amou Securiti Benefici Owned	int of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount	(A) or D)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common	Stock, No	Par Value	e 05/18/2023 A 2,262 ⁽¹⁾ .				A	\$0	29,960			D									
		7	Table II -	Derivat (e.g., p												Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transac Code (Ir 8)		of Deriv	vative crities crired r osed)	Expi	ate Exerc iration Da nth/Day/Y			7. Title and Amount of Securities Underlying Derivative Secu (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)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e rcisable	Ex Da	piration te	Title	0 N	lumber						
Non- qualified stock options (right to buy)	\$34.4								05/2	4/2018 ⁽²⁾	05.	/24/2024	Comm Stock		20,000		20,000)	D		
Non- qualified stock options (right to buy)	\$50.5								06/0	7/2019 ⁽³⁾	06.	/07/2025	Comm Stock		25,000		25,000)	D		
Non- qualified stock options (right to buy)	\$52.17								05/2	4/2020 ⁽⁴⁾	05.	/24/2026	Comm Stock		.3,750		13,750		D		
Non- qualified stock options (right to	\$52.17								05/3	1/2020 ⁽⁵⁾	05.	/31/2026	Comm Stock		7,500		7,500		D		

Explanation of Responses:

- 1. The reported transaction involved the reporting person's receipt of a grant of 2,262 restricted stock units (RSUs) under the Merit Medical Systems, Inc. 2018 Long-Term Incentive Plan. The RSUs vest on May 18, 2024. 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 05/24/2018.
- 3. Becomes exercisable in equal annual installments of 20% commencing 06/07/2019.
- 4. Becomes exercisable in equal annual installments of 33% commencing 05/24/2020.
- 5. Becomes exercisable in equal annual installments of 33% commencing 05/31/2020.

/s/ Brian G. Lloyd, Attorney-

05/22/2023

** 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.