FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPRO	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).

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

					or Sec	tion 3	0(h) o	f the li	nvestmen	t Cor	mpany Act	of 19	140					
1. Name a	2. Issuer Name and Ticker or Trading Symbol MERIT MEDICAL SYSTEMS INC [Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner							
		MMS	SI]								X	Offic	er (give title		wner (specify			
(Last) 1600 W	ot) (First) (Middle) 00 W MERIT PARKWAY					3. Date of Earliest Transaction (Month/Day/Year) 08/31/2005									belo		below	
					4. If A	mend	lment,	Date	of Origina	l File	d (Month/D	ay/Ye	ear)	6. In	dividual o	or Joint/Group	Filing (Check	Applicable
(Street)														Line)				
SOUTH JORDAN	N UI		84095											X	Forn	Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City)	(St	ate)	(Zip)															
		Tak	ole I - N	lon-Deriva	ative S	Secu	ritie	s Acc	quired,	Dis	posed o	f, or	Bene	eficially	y Own	ed		
1. Title of Security (Instr. 3)				2. Transacti Date (Month/Day	/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transac Code (Ir 8)		4. Securities Acquired (Disposed Of (D) (Instr. and 5)				Secur	ities ficially d	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	Repo		(11150: 4)	(111501. 4)
Common	Stock, No l	Par Value		08/31/20	005				S		200		D	\$17.57	7	96,372	D	
Common	Stock, No	Par Value		08/31/20	005				S		1,822		D	\$17.56	7	94,550	D	
Common	Stock, No	Par Value		08/31/20	005				S		514		D	\$17.55	7	94,036	D	
Common	Stock, No l	Par Value		08/31/20	005				S		3,112		D	\$17.53	7	90,924	D	
Common	Stock, No l	Par Value		08/31/20	005				S		3,048		D	\$17.52	. 7	87,876	D	
Common	Stock, No l	Par Value		08/31/20	005				S		1,574		D	\$17.44	7	86,302	D	
Common	Stock, No l	Par Value		08/31/20	005				S		1,626		D	\$17.42	. 7	84,676	D	
Common	Stock, No l	Par Value		08/31/20	005				S		300		D	\$17.46	7	84,376	D	
Common	Stock, No l	Par Value		08/31/20	005				S		6,200		D	\$17.45	7	78,176	D	
Common Stock, No Par Value				08/31/20	005			S		100		D	\$17.47	778,076		D		
Common Stock, No Par Value 08				08/31/20	005			S		200		D	\$17.43	777,876		D		
Common Stock, No Par Value 08/3					005			S		200		D	\$17.54	777,676		D		
Common Stock, No Par Value 09/01/2					005				S		1,104		D	\$17.65	7	76,572	D	
Common Stock, No Par Value															51	7,296(1)	I	401(K) Plan
		T	able II	- Derivati (e.g., pu											Dwned			
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,		4. Transaction Code (Instr.		5. Number of		-	xerc	sable and	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. of Di Se (Ir	Price erivative ecurity estr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or Nur of	ount mber ires				

Explanation of Responses:

 $^{1. \} Represents \ plan \ holdings \ as \ of 5-25-05 \ based \ upon \ most \ recent \ plan \ statement \ timely \ distributed$

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.