SEC Form 4	
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FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 3235-0287

Section obligat	this box if no lo n 16. Form 4 or ions may contir tion 1(b).		STA		d pursu	ant t	to Sect	ion 16	δ(a) of th	ne Seci	uritie	EFICI	ge Ac	t of 193		RSF	liP	Estima		er: verage burde sponse:	0.5		
1. Name ar Gunder		2. Issuer Name and Ticker or Trading Symbol <u>MERIT MEDICAL SYSTEMS INC</u> [MMSI										5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner											
(Last) (First) (Middle)																Officer (give title Other (specify below) below)							
1600 WEST MERIT PARKWAY						3. Date of Earliest Transaction (Month/Day/Year) 05/24/2022											-						
(Street) SOUTH JORDAN UT 84095					4. 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							
(City) (State) (Zip)																	Form filed by More than One Reporting Person						
		Tab	ole I - Nor	n-Deriv	ative	Sec	curiti	es A	cquir	ed, D	isp	osed o	f, or	Bene	efici	ally	Owned						
1. Title of Security (Instr. 3) 2. Transa Date (Month/D						r) E	2A. Deemed Execution Date, if any (Month/Day/Year)			3. Transaction Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				4 and Securi Benefi		s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									c	ode V	′	Amount	Amount		Pric	Transact		tion(s)					
Common Stock, No Par Value 05/24					/2022					Α		3,050	(1)	Α	5	6 <mark>0</mark>	10,	,152		D			
		-	Table II -									osed of, onvertil					wned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	d Date, 1	4. Transactio Code (Instr 8)		5. Number 6.		6. Date Expira	Date Exercisab cpiration Date lonth/Day/Year)		ole and 7. Tr of So Und Deri		Title and Amo f Securities nderlying erivative Secun nstr. 3 and 4)		ount 8. Price o Derivative Security		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Ily J	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code V	,	(A)	(D)	Date Exerci	isable		xpiration ate	Title	0 N 0	umb	er							
Non- qualified stock options (right to buy)	\$34.4								05/24/:	2018 ⁽²⁾	05	5/24/2024	Com Sto		5,00	00		25,000)	D			
Non- qualified stock options (right to buy)	\$50.5								06/07/	2019 ⁽³⁾	06	6/07/2025	Com Sto		5,00	00		25,000)	D			
Non- qualified stock options (right to buy)	\$52.17								05/24/.	2020 ⁽⁴⁾	05	5/24/2026	Com Sto		3,75	50		13,750)	D			
Non- qualified stock options (right to buy)	\$52.17								05/31/2	2020 ⁽⁵⁾	05	5/31/2026	Com Sto		7,50	0		7,500		D			
Explanation	n of Respons	ses:				050			als unit-	(DCU-)		- de Mari	+ Mal			L	19 L ong T	· · · · · · · · · · · · · · · · · · ·	DI	n The DSU			

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 05/24/2018.

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, Attorneyin-Fact

05/26/2022

** 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.