FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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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

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Name and Address of Reporting Person*     Frost Ronald						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 10% Owner  X Officer (give title Other (specify below)					
(Last) 1600 WE	st) (First) (Middle) 00 WEST MERIT PARKWAY					3. Date of Earliest Transaction (Month/Day/Year)  08/10/2022  CHIEF OPERATING OFFICER												ER	
(Street) SOUTH UT 84095 JORDAN				4.	If Am	endme	endment, Date of Original Filed (				(Month/Day/Year)		e) X Form f Form f	Form filed by On-		o Filing (Check Applicable e Reporting Person re than One Reporting			
(City)	(S	tate)	(Zip)											Persor	]				
			ble I - Nor			_				Dis						1	1		
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)			2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 8)		4. Securities Acquired (A Disposed Of (D) (Instr. 3)			5) Securition Beneficit Owned I Reporte	5. Amount of Securities Beneficially Owned Following Reported		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
								Code	٧	Amount	(A) or (D)	Price	(Instr. 3	Transaction(s) (Instr. 3 and 4)					
Common Stock, No Par Value					08/10/2022				M S		20,000	_	\$16.0		,144 ,144		D D		
Common Stock, No Par Value  Common Stock, No Par Value					5,2022						20,000	у Б	Ψ02.1		16,284		I	By 401(k) plan	
			Table II -								osed of, onvertib			Owned				piun	
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D	I 4. Date, Transaction Code (Instr.		5. Number of		6. Date Exercisal Expiration Date (Month/Day/Year)		ble and	ole and 7. Title and 7. of Securities		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ct (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	Amount or Number of Shares						
Non- qualified stock options (right to buy)	\$16.05	08/10/2022			M			20,000	01/28/201	7 <sup>(2)</sup>	01/28/2023	Common stock	20,000	\$0	0		D		
Non- qualified stock options (right to buy)	\$56.25								03/19/202	2 <sup>(3)</sup>	03/19/2028	Common Stock	9,681		9,683	1	D		
Non- qualified stock options (right to buy)	\$28.2								04/14/201	8(4)	04/14/2024	Common Stock	50,000		50,000		D		
Non- qualified stock options (right to buy)	\$44.8								03/02/201	9(5)	03/02/2025	Common Stock	40,000		40,00	00	D		
Non- qualified stock options (right to buy)	\$55.73								03/01/202	0 <sup>(6)</sup>	03/01/2026	Common Stock	30,000		30,00	00	D		
Non- qualified stock options	\$37.71								02/26/202	1 <sup>(7)</sup>	02/26/2027	Common Stock	16,722		16,72	22	D		

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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr. ) 8) A ((/			umber vative urities uired or oosed O) (Instr. and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount 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 Exercisable	Expiration Date	Title	Amount or Number of Shares				
Non- qualified stock options (right to buy)	\$65.03							02/28/2023 <sup>(8)</sup>	02/28/2029	Common Stock	8,094		8,094	D	

## **Explanation of Responses:**

- 1. The price reported in Column 4 of Table 1 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$62.05 to \$62.24, inclusive. The Reporting Person undertakes to provide to Merit Medical Systems, Inc., any security holder of Merit Medical Systems, Inc., or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this Form 4.
- $2.\ Become \ exercisable \ in \ equal \ annual \ installments \ of \ 20\% \ commencing \ 01/28/2017.$
- 3. Become exercisable in equal annual installments of 25% commencing 03/19/2022.
- 4. Become exercisable in equal annual installments of 20% commencing 04/14/2018.
- 5. Become exercisable in equal annual installments of 20% commencing 03/02/2019.
- $6.\ Become\ exercisable\ in\ equal\ annual\ installments\ of\ 20\%\ commencing\ 03/01/2020.$
- 7. Become exercisable in equal annual installments of 25% commencing 02/26/2021.
- 8. Becomes exercisable in equal annual installments of 25% commencing 02/28/2023.

/s/ Brian G. Lloyd, Attorney-in-Fact 08/12/2022

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\ast}$  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.