

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

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

OMB APPROVAL	
OMB Number:	3235-0287
Estimated average burden hours per response:	0.5

1. Name and Address of Reporting Person* <u>STANGER KENT W</u>  (Last) (First) (Middle) <u>1600 W MERIT PARKWAY</u>  (Street) <u>SOUTH JORDAN UT 84095</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>MERIT MEDICAL SYSTEMS INC [ MMSI ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) <input checked="" type="checkbox"/> Director 10% Owner <input checked="" type="checkbox"/> Officer (give title below) Other (specify below) <u>Chief Financial Officer</u>
	3. Date of Earliest Transaction (Month/Day/Year) <u>07/10/2014</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			
Common Stock, No Par Value								79,425	I	By 401(k) plan <sup>(1)</sup>
Common Stock, No Par Value								4,271 <sup>(2)</sup>	D	
Common Stock, No Par Value								60,001	I	Family Limited Liability Company <sup>(3)</sup>
Common Stock, No Par Value	07/10/2014		S		6,000 <sup>(4)</sup>	D	\$14,7604 <sup>(5)</sup>	702,836	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)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 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					
Non-qualified stock options (right to buy)	\$12.02							12/18/2004	12/18/2014	Common Stock	25,000	25,000	D	
Non-qualified stock options (right to buy)	\$11.41							05/25/2005	05/25/2015	Common Stock	18,750	18,750	D	
Non-qualified stock options (right to buy)	\$9.71							12/28/2005	12/28/2015	Common Stock	25,000	25,000	D	
Non-qualified stock options (right to buy)	\$11.53							05/21/2009 <sup>(6)</sup>	05/21/2015	Common Stock	43,750	43,750	D	
Non-qualified stock options (right to buy)	\$13.82							09/26/2010 <sup>(7)</sup>	09/26/2016	Common Stock	25,000	25,000	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)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 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)	\$13.75							08/11/2012 <sup>(8)</sup>	08/11/2018	Common Stock	80,000		80,000	D	

**Explanation of Responses:**

1. Represents plan holdings as of 7/10/2014.
2. Employee stock purchase plan holdings as of 7/10/2014.
3. This report shall not be deemed an admission that the reporting person is the beneficial owner of the securities held by K.W.S. Properties L.C.
4. The shares reported on this form were sold pursuant to the reporting persons's Rule 10b5-1 Sales Plan adopted pursuant to Rule 10b5-1 of the Securities Exchange Act of 1934.
5. 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 \$14.61 to \$14.92, 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.
6. Becomes exercisable in equal annual installments of 20% commencing 05/21/2009.
7. Becomes exercisable in equal annual installments of 20% commencing 09/26/2010.
8. Becomes exercisable in equal annual installments of 20% commencing 08/11/2012.

Gregory L. Barnett, Attorney-in-Fact      07/14/2014

\*\* 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.**