FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL OMB Number: 3235-0362 Estimated average burden

				OWNERSHIP									ll l	urs per re	-		1.0		
_	3 Holdings Rep		Fil	ed pursuant t	o Sec	tion 16	(a) of th	ne Secu	rities Exch	ange Ac	t of 1934			<u> </u>	-				
Form 4 Transactions Reported. 1. Name and Address of Reporting Person* STANGER KENT W				2. Issuer	d pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 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 DirectorV Officer		tle				
(Last) (First) (Middle) 1600 W MERIT PARKWAY					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2014								X Officer (give title Other (specify below) Chief Financial Officer						
(Street)	4. If Amer	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)									
JORDAI	_										X Form filed by One Reporting Person Form filed by More than One Reporting Person								
(City)	(S	tate)	(Zip)										1 01301						
			le I - Non-Deri				cquir	1					-						
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Di if any (Month/Day/	ate,	3. Transaction Code (Instr) 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			sed	5. Amount of Securities Beneficially Owned at end of		6. Ownership Form: Direct (D) or		7. Nature of Indirect Beneficial Ownership				
								Amour	ount (A		Price		Issuer's Fis Year (Instr. 4)	cal	Indirect (I) (Instr. 4)		(Instr. 4)		
Common Stock, No Par Value											80,3		56		I By 4		01(k)		
Common	n Stock, No Par Value											4,271	(2)	D)				
Common Stock, No Par Value											29,52		4 ⁽⁵⁾ I				-		
Common Stock, No Par Value		12/18/2014			G		1,	1,320		(4)		508,1	71	D					
Common Stock, No Par Value		12/30/2014				G	5	85	D	(4)		402,09	.091 ⁽⁵⁾		D				
		7	able II - Deriva (e.g.,	ative Secu puts, calls									y Owned						
1. Title of Derivative Security (Instr. 3)	Title of 2. 3. Transaction Date Execution I (Month/Day/Year) if any		3A. Deemed Execution Date,	4. Transaction of Ocide (Instr. 8) Secu Acqu (A) o Disp		Expira erivative ecurities equired) or sposed (D) estr. 3, 4		e Exercisable and ation Date h/Day/Year)		7. Tit Amo Secu Unde Deriv	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)			Ownersh Form: Direct (D or Indire (I) (Instr.		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					(A)	(D)	Date Exerci	sable	Expiration Date		or Nu of	nount mber ares							
Non- qualified stock options (right to buy)	\$11.41						05/25	05/25/2015		05/25/2015 Com Sto		3,750		18,750		D			
Non- qualified stock options (right to buy)	\$9.71						12/28	3/2005	12/28/201	5 Com Sto		5,000		25	,000	Ι)		
Non- qualified stock options (right to buy)	\$11.53						05/21/.	2009 ⁽⁶⁾	05/21/201	5 Com Sto			4		43,750		D		
Non- qualified stock options (right to buy)	\$13.82						09/26/2	2010 ⁽⁷⁾	09/26/201	6 Com Sto		5,000		25	,000	Ι)		

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)	of		6. Date Exerci Expiration Dat (Month/Day/Ye	e	7. Title and Amount of Securities Underlying Derivative (Instr. 3 ar	f g Security	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)
					(A)	(D)	Date Expiration Exercisable Date 7		Title	Amount or Number of Shares				
Non- qualified stock options (right to buy)	\$13.75						08/11/2012 ⁽⁸⁾	08/11/2018	Common Stock	80,000		80,000	D	
Non- qualified stock options (right to buy)	\$12.06						10/04/2015 ⁽⁹⁾	10/04/2021	Common Stock	10,000		10,000	D	

Explanation of Responses:

- 1. Represents plan holdings as of 12/31/14.
- 2. Employee stock purchase plan as of 12/31/14.
- 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 LC.
- 4. This is a gift.
- 5. Since the date of the reporting person's last ownership report, he transferred 105,495 shares of common stock and K.W.S. Properties LC transferred 30,477 shares of common stock to the reporting person's ex-wife pursuant to a domestic relations order. The reporting person no longer reports as beneficially owned any securities owned by his ex-wife.
- 6. Becomes exercisable in equal annual installments of 20% commmencing 05/21/2009.
- 7. Becomes exercisable in equal annual installments of 20% commmencing 09/26/2010.
- $8. \ Becomes \ exercisable \ in \ equal \ annual \ installments \ of \ 20\% \ commmencing \ 08/11/2012.$
- 9. Becomes exercisable in equal annual installments of 20% commmencing 10/04/2015.

<u>Kent W. Stanger</u> 02/13/2015

** Signature of Reporting Person Da

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.