### Edgar Filing: STANGER KENT W - Form 4

STANGER Form 4	KENT W										
November 2	21, 2011										
FORM	$\mathbf{\Lambda} 4$	STATES	SECU	DITIES A			NCEC	OMMISSION	т	APPROVAL	
	UNITED	SIAILS		ashington			INGE C	OMIMISSION	OMB Number:	3235-0287	
Check t if no lor subject	iger STATE	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF								January 31 2005 d average	
Section Form 4 Form 5 obligati may con <i>See</i> Inst 1(b).	(a) of the l	<b>SECURITIES</b> Section 16(a) of the Securities Exchange Act of 1934, Public Utility Holding Company Act of 1935 or Section of the Investment Company Act of 1940							ours per 0.5		
(Print or Type	Responses)										
1. Name and Address of Reporting Person <u>*</u> STANGER KENT W			2. Issuer Name <b>and</b> Ticker or Trading Symbol				-	5. Relationship of Reporting Person(s) to Issuer			
			MERIT MEDICAL SYSTEMS INC [MMSI]					(Check all applicable)			
(Last) 1600 W M	(First)	(Middle) Y		of Earliest T Day/Year) 2011	ransaction			X Director X Officer (give below) Chief		0% Owner 0ther (specify ficer	
SOUTU	(Street)			endment, D onth/Day/Yea	-	1		6. Individual or Jo Applicable Line) _X_ Form filed by Form filed by M	One Reporting	Person	
(City)	ORDAN, UT 8409							Person			
	× ,	(Zip)					_	uired, Disposed o		-	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemo Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	(Instr. 3, 4	sposed	of (D)	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)	
Common Stock, No Par Value								73,661	Ι	By 401(k) plan (1)	
Common Stock, No Par Value								185,051	I	Family Limited Partnership	
Common Stock, No Par Value								4,270 <u>(2)</u>	D		
Common Stock, No	11/17/2011			M <u>(4)</u>	20,000	А	\$ 6.09	583,594	D		

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Common Stock, No 11/17/2011 Par Value

Par Value

 $F_{\underline{(4)}}$  12,461 D  $\begin{array}{c} \$\\ 13.53 \end{array}$  571,133 D

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

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 control number.

# 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)	e Conversion (Month/Day/Year) Execution Date, if TransactionDe or Exercise any Code Se		5. Number of orDerivative Securities Acquired (A)	Derivative Expiration Date Securities (Month/Day/Year)		7. Title and Am Underlying Sec (Instr. 3 and 4)		
	Derivative Security			or Disposed of (D) (Instr. 3, 4, and 5)				
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	A o N o
Non-qualified stock options (right to buy)	\$ 6.09	11/17/2011	М	20,000	12/08/2002 <u>(3)</u>	12/08/2011	Common Stock	( ) )

# **Reporting Owners**

Reporting Owner Name / Address	Relationships						
reporting o when reality realities	Director	10% Owner	Officer	Other			
STANGER KENT W 1600 W MERIT PARKWAY SOUTH JORDAN, UT 84095	Х		Chief Financial Officer				

## **Signatures**

Kent W. Stanger11/21/2011\*\*Signature of<br/>Reporting PersonDate

### **Explanation of Responses:**

\* 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).

(1) Represents plan holdings as of 11/17/11.

(2) Employee stock purchase plan holdings as of 11/17/11.

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- (3) Becomes exercisable in equal annual installments of 20% commencing 12/8/2002.
- (4) Stock options were exercised in a swap transaction with the Company. 12,461 shares of common stock were surrendered for payroll taxes and payment of the option price. No shares were sold in the open market.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.