

MERIT MEDICAL SYSTEMS INC
 Form 4/A
 May 19, 2014

FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
 Washington, D.C. 20549**

OMB APPROVAL

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
STANGER KENT W

2. Issuer Name and Ticker or Trading Symbol
MERIT MEDICAL SYSTEMS INC [MMSI]

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)

(Last) (First) (Middle)
1600 W MERIT PARKWAY
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)
12/15/2003

Director 10% Owner
 Officer (give title below) Other (specify below)
Chief Financial Officer

SOUTH JORDAN, UT 84095
 (City) (State) (Zip)

4. If Amendment, Date Original Filed (Month/Day/Year)
12/17/2003

6. Individual or Joint/Group Filing (Check Applicable Line)
 Form filed by One Reporting Person
 Form filed by More than One Reporting Person

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)	
				(A) or (D)	Amount or Price			
Common Stock, No Par Value	12/15/2003	12/15/2003	S		\$ 10,000	D	53,001 ⁽²⁾ ⁽³⁾	I ⁽¹⁾ Family Ltd. Partnership
Common Stock, No Par Value	12/15/2003		J		0	D	⁽²⁾ 470,616 ⁽²⁾	D

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

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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 Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Owned Following Transaction (Instr. 5)
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Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
STANGER KENT W 1600 W MERIT PARKWAY SOUTH JORDAN, UT 84095	X		Chief Financial Officer	

Signatures

Kent W. Stanger 05/19/2014
 __Signature of Date
 Reporting Person

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) This Amendment is filed to correct the reference to the ownership form of the shares sold in the subject transaction. The referenced shares were sold by a family limited partnership of which the reporting person holds an indirect interest.
- (2) This Amendment is also filed to correct a computational error in the number of shares previously reported as being held, directly or indirectly, by the reporting person following the transactions originally reported.
- (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.

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.