

MERIT MEDICAL SYSTEMS INC
 Form 4
 May 25, 2005

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 *
 BEAN REX C

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)

3. Date of Earliest Transaction (Month/Day/Year)
 05/18/2005

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

1600 W MERIT PARKWAY

(Street)

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

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

SOUTH JORDAN, UT 84095

(City) (State) (Zip)

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	05/18/2005		M/K		20,833	A	\$ 14.16
Common Stock, No Par Value	05/18/2005		F/K		2,384	D	\$ 14.16
Common Stock, No Par Value							16,800 ⁽²⁾
Common Stock, No Par Value							70,112 ⁽³⁾

Par Value

Common
Stock, No
Par Value

17,777 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.

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(9-02)

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 Security (Instr. 3 and 4)	Am or Num of S
				Code	V (A) (D)	Date Exercisable Expiration Date	Title	
non-qualified stock options (right to buy)	\$ 1.62	05/18/2005		M/K	20,833	05/24/2000 05/24/2005	Common Stock	20
non-qualified stock options (right to buy)	\$ 2.85					05/23/2001 05/23/2011	Common Stock	27
non-qualified stock options (right to buy)	\$ 9.56					05/23/2002 05/23/2012	Common Stock	17
non-qualified stock options (right to buy)	\$ 10.47					05/22/2003 05/22/2013	Common Stock	26
non-qualified stock options (right to buy)	\$ 21.67					12/13/2003 12/13/2013	Common Stock	15
Non-qualified stock options (right to buy)	\$ 13.81					06/10/2004 06/10/2014	Common Stock	15

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
BEAN REX C 1600 W MERIT PARKWAY SOUTH JORDAN, UT 84095		X		

Signatures

Rex C Bean 05/18/2005

__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) Bean Family Investment LLC
- (2) Rex Bean Trust (revocable)
- (3) Rex & Anita Bean Trust

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.