

MERIT MEDICAL SYSTEMS INC

Form 4

May 22, 2008

FORM 4**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

OMB
Number: 3235-0287Expires: January 31,
2005Estimated average
burden hours per
response... 0.5Check 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 *
Nelson Arlin D2. Issuer Name **and** Ticker or Trading
SymbolMERIT 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)

05/21/2008

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

Chief Operating Officer

SOUTH JORDAN, UT 84095

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

(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)
Common Stock, No Par Value			Code V	Amount (D) Price	903	I	By 401(k) Plan ⁽¹⁾

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.**SEC 1474
(9-02)**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)**

Edgar Filing: MERIT MEDICAL SYSTEMS INC - Form 4

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 Am Underlying Sec (Instr. 3 and 4)			
				Code	V	(A)	(D)	Date Exercisable	Expiration Date	Title	A o N o
Non-qualified Stock Options (right to buy)	\$ 2.07							02/12/2001 ⁽²⁾	02/12/2011	Common Stock	
Non-qualified Stock Options (right to buy)	\$ 7.61							12/08/2001 ⁽³⁾	12/08/2011	Common Stock	
Non-qualified Stock Options (right to buy)	\$ 9.74							02/06/2003 ⁽⁴⁾	02/06/2013	Common Stock	
Non-qualified Stock Options (right to buy)	\$ 21.67							12/13/2003	12/13/2013	Common Stock	
Non-qualified Stock Options (right to buy)	\$ 13.81							06/10/2004	06/10/2014	Common Stock	
Non-qualified Stock Options (right to buy)	\$ 15.03							12/18/2004	12/18/2014	Common Stock	1
Non-qualified Stock Options (right to buy)	\$ 12.14							12/28/2005	12/28/2015	Common Stock	1
Non-qualified Stock Options (right to buy)	\$ 12.13							06/27/2008 ⁽⁵⁾	06/27/2014	Common Stock	2
Non-qualified stock options (right to buy)	\$ 14.41	05/21/2008		A		25,000		05/21/2009 ⁽⁶⁾	05/21/2015	Common Stock	2

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Nelson Arlin D 1600 W. MERIT PARKWAY			Chief Operating Officer	

SOUTH JORDAN, UT 84095

Signatures

Rashelle Perry,
Attorney-in-Fact

05/22/2008

__Signature of Reporting Person

Date

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 May 21, 2008.
- (2) Becomes exercisable in equal annual installments of 20% commencing 2/12/02.
- (3) Becomes exercisable in equal annual installments of 20% commencing 12/08/02.
- (4) Becomes exercisable in equal annual installments of 20% commencing 02/06/04.
- (5) Becomes exercisable in equal annual installments of 20% commencing 06/27/08.
- (6) Becomes exercisable in equal annual installments of 20% commencing 05/21/09.

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.