

MERIT MEDICAL SYSTEMS INC
 Form 4
 February 01, 2016

FORM 4

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

OMB APPROVAL

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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 *
 Frost Ronald
 (Last) (First) (Middle)
 1600 WEST MERIT PARKWAY
 (Street)
 SOUTH JORDAN, UT 84095
 (City) (State) (Zip)

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

3. Date of Earliest Transaction (Month/Day/Year)
 01/28/2016

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

5. Relationship of Reporting Person(s) to Issuer
 (Check all applicable)
 ___ Director ___ 10% Owner
 Officer (give title below) ___ Other (specify below)
 Chief Operating Officer

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 Ownership (Instr. 4)
Common Stock, No Par Value				(A) or (D) Price	15,953	I	By 401(k) plan ⁽¹⁾

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

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SEC 1474 (9-02)

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

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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)
Non-qualified stock options (right to buy)	\$ 13.75					08/11/2012 ⁽²⁾ 08/11/2018	Common Stock
Non-qualified stock options (right to buy)	\$ 13.14					07/31/2014 ⁽³⁾ 07/31/2020	Common Stock
Non-qualified stock options (right to buy)	\$ 12.06					10/04/2015 ⁽⁴⁾ 10/04/2021	Common Stock
Non-qualified stock options (right to buy)	\$ 17.27					02/13/2016 ⁽⁵⁾ 02/13/2022	Common Stock
Non-qualified stock options (right to buy)	\$ 16.05	01/28/2016		A	20,000	01/28/2017 ⁽⁶⁾ 01/28/2023	Common Stock

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Frost Ronald 1600 WEST MERIT PARKWAY SOUTH JORDAN, UT 84095			Chief Operating Officer	

Signatures

Ron Frost 02/01/2016
 **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 01/25/2016.
- (2) Become exercisable in equal annual installments of 20% commencing 08/11/2012.
- (3) Become exercisable in equal annual installments of 20% commencing 07/31/2014.

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- (4) Become exercisable in equal annual installments of 20% commencing 10/04/2015.
- (5) Become exercisable in equal annual installments of 20% commencing 02/13/2016.
- (6) Become exercisable in equal annual installments of 20% commencing 01/28/2017.

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.