Nelson Arlin D Form 3/A July 13, 2011

FORM 3

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

OMB APPROVAL

OMB Number:

3235-0104

0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

Estimated average burden hours per

response...

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 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement MERIT MEDICAL SYSTEMS INC [MMSI] Nelson Arlin D (Month/Day/Year) 12/04/2006 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 1600 W. MERIT PARKWAY 12/12/2006 (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) Director 10% Owner _X_ Form filed by One Reporting _X__ Officer Other (give title below) (specify below) SOUTH JORDAN, UTÂ 84095 Form filed by More than One COO Reporting Person (City) (State) (Zip) Table I - Non-Derivative Securities Beneficially Owned 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities (Instr. 4) Beneficially Owned Ownership Ownership (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) Common Stock, No Par Value 903 (1) I by 401(k) plan Â D Common Stock, No Par Value $240 \frac{(5)}{2}$ Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. Persons who respond to the collection of information contained in this form are not

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

required to respond unless the form displays a

currently valid OMB control number.

3. Title and Amount of 6. Nature of 1. Title of Derivative Security 2. Date Exercisable and 5. 4 **Expiration Date** Securities Underlying Ownership Indirect Beneficial (Instr. 4) Conversion (Month/Day/Year) **Derivative Security** or Exercise Form of Ownership (Instr. 4) Price of Derivative (Instr. 5) Derivative Security:

Edgar Filing: Nelson Arlin D - Form 3/A

	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Security	Direct (D) or Indirect (I) (Instr. 5)	
Non-qualified Stock Options (right to buy)	12/28/2005	12/28/2015	Common Stock	10,000	\$ 12.14	D	Â
Non-qualified Stock Options (right to buy)	12/18/2004	12/18/2014	Common Stock	10,000	\$ 15.03	D	Â
Non-qualified Stock Options (right to buy)	06/10/2004	06/10/2014	Common Stock	1,500	\$ 13.81	D	Â
Non-qualified Stock Options (right to buy)	12/13/2003	12/13/2013	Common Stock	3,500	\$ 21.67	D	Â
Non-qualified Stock Options (right to buy)	02/06/2003(4)	02/06/2013	Common Stock	8,889	\$ 9.74	D	Â
Non-qualified Stock Options (right to buy)	12/08/2001(3)	12/08/2011	Common Stock	8,890	\$ 7.61	D	Â
Non-qualified Stock Options (right to buy)	02/12/2001(2)	02/12/2011	Common Stock	8,335	\$ 2.07	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships					
	Director	10% Owner	Officer	Other		
Nelson Arlin D 1600 W. MERIT PARKWAY SOUTH JORDAN, UT 84095	Â	Â	COO	Â		

Signatures

Arlin D. Nelson 07/13/2011

**Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(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 December 6, 2006
- (2) Become exercisable in equal annual installments of 20% commencing 2/12/2002
- (3) Become exercisable in equal annual installments of 20% commencing 12/8/2002
- (4) Become exercisable in equal annual installments of 20% commencing 2/6/2004
- (5) Reflects shares owned by the reporting person and his spouse which were inadvertently omitted from the reporting person's Form 3, and were also omitted from Forms 4 filed by the reporting person subsequent to his original Form 3 filing.

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.

Reporting Owners 2