FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average b	Estimated average burden									

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					UI V	Secui	011 30(11)	or the i	iiivesiiiiei	it Coi	lipally Act	01 194	,						
Name and Address of Reporting Person* OLSON CHARLES W					2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX]									Relationship of Reporting Person(s) to Issuer (Check all applicable)					
<u>OLSOP</u>	<u> CHARL</u>	<u>LES W</u>			1		1021	00 11	<u></u> [0.		. 1				Dire	ector		10% C	wner
(Last)	(Eir	ret)	(Middle)		3. D	Date of Earliest Transaction (Month/Day/Year)								\dashv		Officer (give title below)		Other below)	(specify
(Last) (First) (Middle) 9924 WEST 74TH STREET				09/	09/26/2018									Sen	Senior VP of Bus Dev, Med Dev				
Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
EDEN PI	RAIRIE MI	N !	55344													m filed by On			
(City)	(St	ate) ((Zip)			Form filed by More the Person									re tha	an One Rep	orting		
		Tab	le I - Nor	n-Deriv	/ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Ben	eficia	ally Owr	ed			
Title of Security (Instr. 3) 2. Transac Date (Month/Date)					Execution		n Date,	Transaction Disposed Code (Instr. 5)		ities Acquired (A d Of (D) (Instr. 3,			nd Secu Bene Own	Amount of curities neficially yned Following		ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A (I	A) or O)	Price	Trans	eported ansaction(s) nstr. 3 and 4)			(Instr. 4)
Common Stock 09/2				6/2018	/2018			F		1,109)	D	\$73	3.6	29,325		D		
Common Stock													800			I	By IRA		
		Ta	able II - I)								sed of, onvertib				y Owne	d			
Title of Derivative Security Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	Date,	Date, Transacti Code (Ins				6. Date Exercisable ar Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	or	ount nber res					

Explanation of Responses:

Remarks:

/s/ Bryan K. Phillips, on behalf 09/28/2018 of Charles W. Olson

** Signature of Reporting Person Date

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

- * 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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.

(A) (D)