FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

|            | 1110 |      | /~ | <br>O |
|------------|------|------|----|-------|
| Washington | DC 2 | 0549 |    |       |

| OMB APF                  | OMB APPROVAL |  |  |  |  |  |  |  |
|--------------------------|--------------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287    |  |  |  |  |  |  |  |
| Estimated average burden |              |  |  |  |  |  |  |  |

0.5

11. Nature

Beneficial

Ownership

(Instr. 4)

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).                      |  |  |  |  |  |  |  |

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 1. Name and Address of Reporting Person* SIDES TERI WOODWICK |                        |                                    |           | 2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [ SRDX ] |                                 |           |   |                  |  | 5. Rel<br>(Chec   | ationship of Reportii<br>k all applicable)<br>Director<br>Officer (give title<br>below) | g Person(s) to Issuer  10% Owner  Other (specify below)           |            |
|--|------------------------|------------------------------------|-----------|--|---------------------------------|-----------|---|------------------|--|---|---|---|------------|
| (Last)<br>9924 WEST 7  | (First)<br>74TH STREET | (Middle)                           |           |  | te of Earliest Transa<br>4/2024 | action (I | Month   | (Day/Year)       |  |   | SVP, Vascula  | r Interventior  | ıs         |
| (Street) EDEN PRAIRIE  | MN                     | 55344                              |           | 4. If Amendment, Date of Original Filed (Month/Day/Year)           |                                 |           |   | 6. Indi<br>Line) | ividual or Joint/Group Filing (Check Applicable  Form filed by One Reporting Person Form filed by More than One Reporting Person |   |   |   |            |
| (City)   | (State)                | (Zip)                              |           |  |                                 |           |   |                  |  |   |   |   |            |
|  | Ta                     | able I - No                        | n-Derivat | tive S   | ecurities Acq                   | uired     | Dis   | posed of,        | or Be  | neficially  | y Owned   |   |            |
| Date   |                        | 2. Transacti<br>Date<br>(Month/Day |           | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year)        | Code (Instr.                    |           | 4. Securities Acquired (A) or<br>Disposed Of (D) (Instr. 3, 4 and<br>5) |                  |  | 5. Amount of<br>Securities<br>Beneficially<br>Owned Following<br>Reported | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4)                       | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |            |
|  |                        |                                    |           |  |                                 | Code      | v   | Amount           | (A) or<br>(D)  | Price   | Transaction(s)<br>(Instr. 3 and 4)  |   | (111501.4) |
| Common Stoc  | k                      |                                    | 12/04/20  | 024  |                                 | F         |   | 946              | D  | \$39.91   | 34,703  | D   |            |
|  |                        | Table II -                         |           |  | curities Acqui                  |           | •   | •                |  | •   | Owned   |   |            |

6. Date Exercisable and

Expiration

Date

Expiration Date

Date

Exercisable

(Month/Day/Year)

**Explanation of Responses:** 

or Exercise Price of Derivative

Security

1. Title of

Derivative

Security (Instr. 3)

/s/ John Manders on behalf of Teri Woodwick Sides \*\* Signature of Reporting Person

Amount or Number

Shares

7. Title and

Amount of

Securities

Derivative

Title

Underlying

Security (Instr. 3 and 4)

8. Price of Derivative

Security (Instr. 5)

Date

12/06/2024

9. Number of

derivative

Securities

Following Reported Transaction(s) (Instr. 4)

Owned

Beneficially

10.

Form: Direct (D) or Indirect (I) (Instr. 4)

Ownership

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

3A. Deemed

Execution Date,

if any (Month/Day/Year)

\* If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

3. Transaction

(Month/Day/Year)

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

4. Transaction Code (Instr. 8) 5. Number

Derivative

Securities

Acquired
(A) or
Disposed
of (D)
(Instr. 3, 4

and 5)

(A) (D)

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.