FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPR | OVAL | | | | | | | |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | |
| Estimated average burden | | | | | | | | |
| hours per response: | 0.5 | | | | | | | |

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 or Section 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* DURAN LISE W | | | | | 2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX] | | | | | | | | (Che | ck all app Dired | olicable) ctor | | 6 Owner | |
|--|---|------|----------------------------------|---------|--|---|---------|--|-----------|-------------------------|---|----------|-----------------|--|---|---|--|--------------------|
| (Last) (First) (Middle) 9924 WEST 74TH STREET | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/25/2009 | | | | | | | | X | belov | , | bel Research | er (specify ow) |
| (Street) EDEN PRAIRIE MN 55344 (City) (State) (Zip) | | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | Line) | 5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Sec | curitie | s Ac | quired, | Dis | posed o | f, or I | 3ene | ficially | / Owne | ed | | |
| 1. Title of Security (Instr. 3) 2. Transact Date (Month/Date | | | | | | Execution Date, | | 3. Transaction Code (Instr. 8) | | | | | | Securi Benef | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect | |
| | | | | | | | | | Code | v | Amount (A) or (D) | | or F | Price | Transa | action(s) 3 and 4) | | (111511.4) |
| Common Stock 02/25/2 | | | | | | | | | s 2,000 D | |) [| \$18.036 | 5 5 | 8,477 | D | | | |
| Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | tive ty Conversion or Exercise (Month/Day/Year) Pice of Derivative Security Execution Date, if any (Month/Day/Year) (Month/Day/Year) 8) | | n Date, Transactio Code (Inst | | | on of | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) | | De Se (In | Price of rrivative curity estr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | Beneficial Ownership ct (Instr. 4) | |
| | | | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | or Num of Shar | | | | | | | | |

Explanation of Responses:

Remarks:

Gordon S. Weber, on behalf of

Lise W. Duran

02/26/2009

** 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.