FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	J ,		

OIVIB APPROVAL										
OMB Number:	3235-0287									
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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).

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 10b5Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1(c). Se	ee Instruction 1	0.																	
Name and Address of Reporting Person* Stich Joseph J.				2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX]								(Che	5. Relationship of Reporting Person(s) to Iss (Check all applicable) Director 10% Own Officer (give title Other (sp below) SVP of HR, President IVD						
(Last) (First) (Middle) 9924 WEST 74TH STREET			3. Date of Earliest Transaction (Month/Day/Year) 12/04/2024																
(Street) EDEN PRAIRIE (City)	E MI		5344 Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Ind Line)							
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Bene	ficial	ly Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,				es Acquired (A) Of (D) (Instr. 3,			5. Amo Securit Benefic Owned Report	ies cially Following	6. Owners Form: Dire (D) or Indi (I) (Instr. 4	ect	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
								Code	v	Amount	(A) or (D) Pr		Price	Transaction(s) (Instr. 3 and 4)					
Common Stock 12/04/2					2024			F		1,034 D \$		\$39.91	61,631		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)	titve Conversion Date Execution Date, ity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8)		of Deriv	r osed) r. 3, 4	Expiration Die (Month/Day/		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		Di Se (Ii	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Owner Form Direct or Ind (I) (In	t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

/s/ John Manders on behalf of Joseph J. Stich

12/06/2024

** 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.