FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| | OMB APPROVAL | | | | | | | | |
|---|--------------------------|-----------|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | |
| 1 | Estimated average burden | | | | | | | | |

D

| obligations may continue. See Instruction 1(b). | | | | | | pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 | | | | | | | | hours | hours per response: | | 0.5 | | |
|---|---|---|--|--|---------------------|---|---|---------|-------|--|--|---|---|---|--|---|------------|--|--|
| 1. Name and Address of Reporting Person* BRAINERD MARY K | | | | | | 2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX] | | | | | | (Ch | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner | | | | | | |
| (Last) 8170 331 | (Fi | , | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 11/30/2009 | | | | | | | _ | (give title | | Other (specify below) | | | |
| (Street) BLOOMINGTON MN 55425 | | | 4. If Am | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | Line | Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | | |
| (City) | (St | - | (Zip) le I - No i | n-Deriv | ative Se | curities Ac | cauire | ed. Dis | posed | of. c | or Ben | eficial | lv Owned | <u> </u> | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | | action Day/Year) | 3. | 3. 4. Securiti Transaction Disposed Code (Instr. 5) | | | Acquired | (A) or | 5. Amou Securitie Benefici Owned I | nt of es ally following | 6. Owner Form: I (D) or li (I) (Inst | Direct ndirect r. 4) | 7. Nature of Indirect Beneficial Ownership | | | |
| | | | | | | | | de V | Amoun | it | (A) or (D) | Price | | eported ansaction(s) nstr. 3 and 4) | | | (Instr. 4) | | |
| | | 7 | | | | urities Acq ls, warrants | | | | | | | Owned | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) | | Date, | Transaction of E | | Expira | Expiration Date (Month/Day/Year) Amou Secul Unde Deriv | | | Title and accuration of curities derlying rivative S | | 8. Price of Derivative Security (Instr. 5) | vative derivative irity Securities | | 0. Ownership Form: Direct (D) or Indirect () (Instr. 4) | Beneficial Ownership (Instr. 4) | | | |

Explanation of Responses:

\$22.35

1. Exercisable in annual increments of 25%, commencing 11/30/10.

11/30/2009

Remarks:

Director Stock

Option

(Right to Buy)

> /s/ Gordon S. Weber, on behalf of Mary K. Brainerd

Amount Number

of Shares

8,333

\$0.00

Expiration

11/30/2016

Date

Title

Common

Stock

12/02/2009

** Signature of Reporting Person

Date

Reported Transaction(s) (Instr. 4)

8,333

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).

Code ٧

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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.

Acquired
(A) or
Disposed
of (D)
(Instr. 3, 4
and 5)

(A)

8,333

(D)

Exercisable

(1)