FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	OF CHANGES	IN BENEFIC	IAL OWNERS	SHIP

	OMB APPRO	DVAL
l	OMB Number:	3235-0287
l	Estimated average bure	den
l	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* BEDOYA JOSE H						2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX]									(Ch	Relationship leck all appl	cable)	g Pers	son(s) to Iss	
(Last) 604 10TI	(F H STREET	irst)	(Middle)			3. Date of Earliest Transaction (Month/Day/Year) 12/31/2013									1	• •	(give title		Other (s	
(Street)			80302		4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5		(Zip)	n Doriv				ioo Aa		4 D			• • • •	Don.	ficial	h. Ours	J			
1. Title of Security (Instr. 3) 2. Transpate			2. Transa	action	Execution Date,		3. 4. Securit Transaction Disposed Code (Instr. 5)		ot, or Beneticiall ities Acquired (A) or d Of (D) (Instr. 3, 4 and			5. Amou Securiti Benefic Owned	5. Amount of Securities Beneficially Owned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
									e v		Amount	(<i>A</i>) or)	Price	Reporte Transac (Instr. 3	tion(s)			(Instr. 4)	
Common Stock				12/31	1/2013				A			486(1))	A	\$24.3	39 4	4,813		D	
Common Stock				03/31	/2014				A			525 ⁽¹⁾)	A	\$22.	6 5	5,338		D	
Common Stock				04/29	/2014				M			8,000		A	\$21.8	32 13	3,338		D	
Common Stock 04/2				04/29	/2014				F	F		7,930 ⁽²⁾		D	\$22.0)1 5,4	5,408(3)		D	
			able II -									sed of, onverti				Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Executior if any (Month/Da	n Date,	4. Transactio Code (Insti 8)		n of		Expirat	6. Date Exercisa Expiration Date (Month/Day/Yea			7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	e s lly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercis	able	E) Dá	opiration ate	Title	OI N Of	umber					
Stock Option (right to buy)	\$21.82	04/29/2014			M			8,000	(4)		05	5/17/2014	Comm		3,000	\$0.00	0		D	

Explanation of Responses:

- 1. The reporting person elected to receive vested deferred stock units (DSUs) in lieu of quarterly cash retainer payments. The DSUs are settled in shares of the issuer's common stock as described below.
- 2. The reporting person paid the exercise price of a stock option issued in accordance with Rule 16b-3 by having shares of stock acquired upon the exercise withheld by the issuer.
- 3. The amount beneficially owned includes 2,800 restricted stock units (RSUs) that vest on service-based vesting dates and 2,538 DSUs that are vested upon issuance, each of which will be settled in shares of the issuer's common stock on a 1 for 1 basis when the reporting person's service as a director ends.

4. Fully vested.

Remarks:

/s/ Bryan K. Phillips, on behalf of Jose H. Bedoya

05/09/2014

** 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.