FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	D.C. 20549
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Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEMENT OF
obligations may continue. See Instruction 1(b).	Filed pursuan

F CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

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

Name and Address of Reporting Person* Greaney Thomas A.						2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX]									ck all applic	ctor		son(s) to Issi 10% Ow Other (s	ner	
(Last) 9924 WI	(F EST 74TH	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 11/28/2017									X	Officer (give title below) COO of Medica			below)	респу	
(Street) EDEN P (City)	RAIRIE M	State)	55344 (Zip)		_	4. If Amendment, Date of Original Filed (Month/Day/Year						,	l	_ine) X	′					
		Tak	le I - No	n-Deri	vativ	e Se	curities	s Ac	quired,	Dis	posed c	of, or Be	nefici	ally	Owned					
Da			Date	saction	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)		ties Acquir d Of (D) (Ins	ed (A) o str. 3, 4 a	r and		s ally ollowing	Form (D) o	n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership				
								Code	v	Amount	(A) o	r Pric	е	Transact	Reported Transaction(s) (Instr. 3 and 4)		[(Instr. 4)		
Common Stock				11/2	11/28/2017				A		4,518	8 A \$0.0		.00	7,231		D			
			Table II -									, or Ben ble secu			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisa Expiration Date (Month/Day/Yea		•	7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		[8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisab		expiration pate	Title	Amou or Numb of Share	er						
Employee Stock Option (right to	\$33.2	11/28/2017			A		21,285		(1)	1	1/28/2024	Common Stock	21,28	35	\$0.00	21,28	5	D		

Explanation of Responses:

1. The award vests in four equal installments on each of the first four anniversaries of the November 28, 2017 grant date.

Remarks:

/s/ Bryan K. Phillips on behalf of Thomas A. Greaney

11/30/2017

** 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.