FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF 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

BARC (Last)	Name and Address of Reporting Person* BARCLAY BRUCE Last) (First) (Middle) 924 WEST 74TH STREET				3. D	Sur Name and Ticker or Trading Symbol SURMODICS INC [SRDX] 3. Date of Earliest Transaction (Month/Day/Year) 03/21/2006								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title below) President & COO				wner	
(Street) EDEN P (City)	RAIRIE M		55344 (Zip)		4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Indi Line) X							
			le I - Non						cquired, [
1. Title of	Security (Ins	tr. 3)		2. Transactio Date (Month/Day/\		ar) E	2A. Deemed Execution Date, if any (Month/Day/Year		, Transaction Dispose Code (Instr. 5)		Disposed	rities Acquired (A) or ed Of (D) (Instr. 3, 4 an			5. Amou Securitie Benefici Owned F	es	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
					(<i></i>	· ·	v A	Amount (A) or Pr			се	Reported		(1) (111341. 4)		(Instr. 4)
Common	Stock														41,9	939 ⁽³⁾		D	
Common	Stock			03/21	1/2006	6			Α		7,500) A	;	\$0 49,439 D					
		-				_													
		'							quired, Di s, options						Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)		d Date,		calls	5. Nu of Deriv Secu Acqu (A) o Dispo	rrants umber vative urities uired or osed or r. 3, 4		cisable	and		d Amou ies g Securit	Int 8.	Price of perivative security instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	is Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
Derivative Security	Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deeme Execution if any	d Date,	uts, (4. Transa Code (I	calls	5. Nu of Deriv Secu Acqu (A) o Disp of (D (Instr	rrants umber vative urities uired or osed or r. 3, 4	6. Date Exer	cisable cisable date Year)	e and	7. Title and of Security Underlying Derivative	d Amou ies g Securit	s) sint 8. D Sint (In	. Price of Perivative Security	derivative Securities Beneficial Owned Following Reported Transactio	is Illy	Ownership Form: Direct (D) or Indirect	of Indirect Beneficial Ownership
Derivative Security	Conversion or Exercise Price of Derivative	3. Transaction Date	3A. Deeme Execution if any	d Date,	4. Transa Code (I 8)	action Instr.	5. Nu of Deriv Secu Acqu (A) o Disp of (D (Instrand !	umber vative urities uired or osed) r. 3, 4	S, Options 6. Date Exel Expiration E (Month/Day)	cisable cate Year)	e and	7. Title an of Securit Underlyin Derivative (Instr. 3 ar	d Amou ies g Securit nd 4)	s) Int 8. D Si	. Price of Perivative Security	derivative Securities Beneficial Owned Following Reported Transactio	on(s)	Ownership Form: Direct (D) or Indirect	of Indirect Beneficial Ownership

Explanation of Responses:

- 1. Exercisable in annual increments of 10,000 shares commencing on 12/1/2004.
- 2. Exercisable in annual increments of 15,000 shares commencing on 1/31/2006.
- 3. Includes 757 shares acquired through Employee Stock Purchase Plan for the phase ended 2/28/06.

Remarks:

/s/ Bruce J Barclay

03/22/2006

** 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.