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| OMB APPROVAL  |
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**UNITED STATES  
SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

**SCHEDULE 13G**

**Under the Securities Exchange Act of 1934  
(Amendment No. 7)\***

**SurModics, Inc.**

(Name of Issuer)

Common Stock, \$.05 par value  
(Title of Class of Securities)

868873 10 0  
(CUSIP Number)

December 31, 2005  
(Date of Event Which Requires Filing of this Statement)

Check the appropriate box to designate the rule pursuant to which this Schedule is filed:

- Rule 13d-1(b)
- Rule 13d-1(c)
- Rule 13d-1(d)

\* The remainder of this cover page shall be filled out for a reporting person's initial filing on this form with respect to the subject class of securities, and for any subsequent amendment containing information which would alter the disclosures provided in a prior cover page.

The information required in the remainder of this cover page shall not be deemed to be "filed" for the purpose of Section 18 of the Securities Exchange Act of 1934 ("Act") or otherwise subject to the liabilities of that section of the Act but shall be subject to all other provisions of the Act (however, see the Notes).

**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 control number.**

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| <b>1</b>  | NAMES OF REPORTING PERSONS:<br>David A. Koch<br><br>I.R.S. IDENTIFICATION NOS. OF ABOVE PERSONS (ENTITIES ONLY):  |   |
| <b>2</b>  | CHECK THE APPROPRIATE BOX IF A MEMBER OF A GROUP (SEE INSTRUCTIONS):<br><br>(a) <input type="radio"/><br>(b) <input type="radio"/>                      |   |
| <b>3</b>  | SEC USE ONLY:   |   |
| <b>4</b>  | CITIZENSHIP OR PLACE OF ORGANIZATION:<br><br>U.S.A.   |   |
| NUMBER OF<br>SHARES<br>BENEFICIALLY<br>OWNED BY<br>EACH<br>REPORTING<br>PERSON<br>WITH: | <b>5</b>  | SOLE VOTING POWER:<br><br>789,495 (includes 16,200 shares which may be purchased upon exercise of options)      |
|   | <b>6</b>  | SHARED VOTING POWER:<br><br>234,000   |
|   | <b>7</b>  | SOLE DISPOSITIVE POWER:<br><br>789,495 (includes 16,200 shares which may be purchased upon exercise of options) |
|   | <b>8</b>  | SHARED DISPOSITIVE POWER:<br><br>234,000  |
| <b>9</b>  | AGGREGATE AMOUNT BENEFICIALLY OWNED BY EACH REPORTING PERSON:<br><br>1,023,495 (includes 16,200 shares which may be purchased upon exercise of options) |   |
| <b>10</b>   | CHECK IF THE AGGREGATE AMOUNT IN ROW (9) EXCLUDES CERTAIN SHARES (SEE INSTRUCTIONS):<br><br><input type="radio"/>                                       |   |
| <b>11</b>   | PERCENT OF CLASS REPRESENTED BY AMOUNT IN ROW (9):<br><br>5.5%  |   |
| <b>12</b>   | TYPE OF REPORTING PERSON (SEE INSTRUCTIONS):<br><br>IN  |   |

Answer every item. If an item is inapplicable or the answer is in the negative, so state.

**Item 1(a) Name of Issuer:**

SurModics, Inc.

**Item 1(b) Address of Issuer's Principal Executive Offices:**

9924 West 74th Street  
Eden Prairie, MN 55344-3523

**Item 2(a) Name of Person Filing:**

See Cover Page Item 1

**Item 2(b) Address of Principal Business Office or, if none, residence:**

1582A Homestead Trail  
Long Lake, MN 55356

**Item 2(c) Citizenship:**

See Cover Page Item 4

**Item 2(d) Title of Class of Securities:**

Common Stock, \$.05 par value

**Item 2(e) CUSIP No.:**

See Cover Page

**Item 3 Statement filed pursuant to Rule 13d-1(b), or 13d-2(b) or (c):**

Not applicable

**Item 4 Ownership**

See Cover Page Items 5 through 11

**Item 5 Ownership of Five Percent or Less of a Class:**

If this statement is being filed to report the fact that as of the date hereof the reporting person has ceased to be the beneficial owner of more than five percent of the class of securities, check the following o.

**Item 6 Ownership of More than Five Percent on Behalf of Another Person:**

Not applicable

**Item 7 Identification and Classification of the Subsidiary Which Acquired the Security Being Reported on by the Parent Holding Company:**

Not applicable

**Item 8 Identification and Classification of Members of the Group:**

Not applicable

**Item 9 Notice of Dissolution of Group:**

Not applicable

**Item 10 Certifications:**

Not applicable

SIGNATURE

After reasonable inquiry and to the best of my knowledge and belief, I certify that the information set forth in this statement is true, complete and correct as of December 31, 2005.

February 7, 2006

\_\_\_\_\_  
(Date)

/s/ David A. Koch

\_\_\_\_\_  
(Signature)

David A. Koch

\_\_\_\_\_  
(Name and title)