FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	DС	20549
rvasiliigion,	D.C.	20040

STATEMENT	OF CHANGES	IN BENEFICIAL	OWNERSHIP

OMB APPROVAL										
OMB Number:	3235-0287									
Estimated average burden										
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* OLSON CHARLES W					2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX]								k all app Direc Office	tor er (give title	ng Per	10% Ov	vner		
(Last) (First) (Middle) 9924 WEST 74TH STREET					3. Date of Earliest Transaction (Month/Day/Year) 11/25/2022								71	SVP,	w) , Medical Devi		below) ce Coating	gs	
(Street) EDEN PRAIRIE	E MI	N 5	5344		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi Line) X	-7				on		
(City)	(Sta	ate) (Z	Zip)																
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	enef	icially	y Own	ed			
Date				2. Transac Date (Month/Da	Execution D		Date,	Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)		4 and Securit		ties For cially (D) I Following (I) (n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) ((D)	Pri	ce	Transa	ction(s) 3 and 4)			(
Common Stock 11/25/					022		F		471	D	\$3	36.02	41	1,903		D			
Common	Stock															800		I	By IRA
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	of 2. 3. Transaction 3A. Deemed Execution Date Execution Date, if any			ransaction of ode (Instr. Derivativ		vative irities ired r osed)	6. Date Exercisable and Expiration Date (Month/Day/Year)		ite	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		nt				10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)	Date Exercis	able	Expiration Date	Title	Number of Shares						
Explanation	n of Respons	ses:																	

Remarks:

/s/ John Manders on behalf of Charles W. Olson

11/29/2022

** 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.