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

1. Name and Address of Reporting Person* Stich Joseph J. (Last) (First) (Middle) 9924 WEST 74TH STREET (Street)					3. D 11/	2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX] 3. Date of Earliest Transaction (Month/Day/Year) 11/09/2018 4. If Amendment, Date of Original Filed (Month/Day/Year)								S. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director				
(City)	EDEN PRAIRIE MN 55344													X Form filed by One Reporting Person Form filed by More than One Reporting Person				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/					Execution Date,					4. Securities Disposed Of			d 5) Secur Benef Owne		ficially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
		Code	v	Amount			(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)			(Instr. 4)					
Common Stock 11/09/2					018	18			S ⁽¹⁾		200	D	\$62.	.07		2,008 ⁽²⁾	D	
Common Stock 11/09/20					018	18			S ⁽¹⁾		1,046	D	\$63.60	63.6076 ⁽³⁾		50,962	D	
Common Stock 11/09/2				018	18			S ⁽¹⁾		754	D	\$64.44	\$64.4499(4)		50,208	D		
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)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transa Code (8)	Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable Expiration Date (Month/Day/Year) Date Expir Exercisable Date		Expiration	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Number of		t		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

- 1. Sales effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person on May 22, 2018.
- 2. Includes 289 shares acquired through the Employee Stock Purchase Plan for the phase ending August 31, 2018.
- 3. Reflects the weighted average price of 1,046 shares of common stock of Surmodics,Inc. sold by the reporting person in multiple transactions on November 9, 2018 with sale prices ranging from \$63.18 to \$64.00 per share. The reporting person undertakes to provide upon request by the U.S. Securities and Exchange Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares sold at each separate price.
- 4. Reflects the weighted average price of 754 shares of common stock of Surmodics,Inc. sold by the reporting person in multiple transactions on November 9, 2018 with sale prices ranging from \$64.32 to \$64.995 per share. The reporting person undertakes to provide upon request by the U.S. Securities and Exchange Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares sold at each separate price.

Remarks:

/s/ Bryan K. Phillips, on behalf of Joseph J. Stich

11/13/2018

** 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.