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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

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

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

1. Name and Address of Reporting Person* KELLER KENNETH H					2. Issuer Name and Ticker or Trading Symbol <u>SURMODICS INC</u> [SRDX]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
					- 3.1	3. Date of Earliest Transaction (Month/Day/Year)								X Director Officer (give title				10% Owner Other (specify		
(Last) 6182 CR		irst) RRY TRAIL	(Middle)			/17/2			iououon (ino		uj, iouij				below)			below)		
					_ 4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) WOODBURY MN 55129														X Form filed by One Reporting Person						
(City) (State) (Zip)					-										Form filed by More than One Reporting Person					
				n-Deri	vativ	e Se	curitie	s A	cquired, I	Dis	oosed o	of, or Be	enefic	ially	v Owned	1				
1. Title of Security (Instr. 3) 2. Tran Date				saction	action 2A Ex Day/Year) if a		ned n Date ay/Ye	e, 3. Code (li			rities Acquired (A ed Of (D) (Instr. 3,		, 4 and Sec Ben Own		nt of es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	nount (A) ((D)		се	Reporte Transac (Instr. 3	ction(s)			(Instr. 4)	
Common	Stock														6,	800		D		
		٦							quired, Di s, option						Owned					
1. Title of Derivative Security (Instr. 3) 2. 3. Transaction Date (Month/Day/Year) 3A. Deeme Execution if any (Month/Day/Year)			Date,	4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		Derivative Security		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	Amou or Numb of Share	er	r					
Director Stock Option (Right to Buy)	\$6.5625								(1)	0	5/17/2009	Common Stock	6,00	0		6,000)	D		
Director Stock Option (Right to Buy)	\$2.5								(2)	10)/01/2007	Common Stock	28,00	00		24,000	0	D		
Director Stock Option (Right to Buy)	\$25.094								(3)	0	9/18/2010	Common Stock	2,00	0		2,000)	D		
Director Stock Option (Right to Buy)	\$34.85								(4)	1:	1/21/2011	Common Stock	1,00	0		1,000)	D		
Director Stock Option (Right to Buy)	\$29.17								(5)	0	3/17/2013	Common Stock	2,00	0		2,000)	D		
Director Stock Option (Right to Buy)	\$21.82	05/17/2004			A		5,000		(6)	0	5/17/2014	Common Stock	5,00	0	\$0	5,000)	D		

Explanation of Responses:

1. Exercisable in annual increments of 1,200 shares each commencing on 5/17/99.

2. Exercisable in annual increments of 5,600 shares each commencing on 10/1/97.

3. Exercisable in annual increments of 400 shares each commencing on 9/18/00.

4. Exercisable in annual increments of 200 shares each commencing on 11/21/01.

5. Exercisable in annual increments of 400 shares each commencing on 3/17/03.

6. Exercisable in annual increments of 1,000 shares each commencing on 5/17/04.

Remarks:

R. Rose pursuant to Power of Attorney previously filed

** Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 \ast 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.