SURMODICS INC Form 3 February 19, 2014 FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION OMB APPROVAL Washington, D.C. 20549 OMB Number:

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address Person <u>*</u> NELSON TI		-	2. Date of Event Requiring Statement (Month/Day/Year)	3. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX]					
(Last) (Fi 9924 WEST 747	irst)	(Middle)	02/17/2014	2014 4. Relationship of Reporting Person(s) to Issuer (Check all applicable)			5. If Amendment, Date Original Filed(Month/Day/Year)		
	reet)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person		
(City) (St	tate)	(Zip)	Table I - N	Non-Derivati	ive Securiti	es Bei	neficially Owned		
1.Title of Security (Instr. 4)			2. Amount o Beneficially (Instr. 4)		3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nat Owne (Instr.	.		
Common Stock			3,841		D	Â			
Reminder: Report or owned directly or ind	directly. Person	s who resp	ch class of securities benefic	51	EC 1473 (7-02))			
information contained in this form are not required to respond unless the form displays a currently valid OMB control number.									
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)									

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)		3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		4. Conversion or Exercise Price of	5. Ownership Form of Derivative	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	Derivative Security	Security: Direct (D) or Indirect	

3235-0104

January 31,

2005

0.5

Expires:

response...

Estimated average burden hours per

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Shares

(I) (Instr. 5)

Reporting Owners

Reporting Owner Name / Address	Relationships							
	Director	10% Owner	Officer	Other				
NELSON TIMOTHY S 9924 WEST 74TH STREET EDEN PRAIRIE, MN 55344	X	Â	Â	Â				
Signatures								
/s/ Andrew V. Tran, on behalf of Nelson	02/1	9/2014						
** Signature of Reporting Pers	Date							
Explanation of Responses:								

* If the form is filed by more than one reporting person, *see* Instruction 5(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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays

a currently valid OMB number.