Edgar Filing: SURMODICS INC - Form 4

SURMODIC	LS INC											
Form 4												
January 05, 2	2015											
									-	OMB APPROVAL		
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549								OMB Number:	3235-0287			
Check thi									Expires:	January 31,		
if no long subject to		EMENT O	F CHAN	GES IN I	BENEFI	CIA	LOW	NERSHIP OF	·	2005		
-	SECURITIES								Estimated average burden hours per			
Form 4 or	r								response	•		
Form 5	•						•	e Act of 1934,				
obligation may cont <i>See</i> Instru 1(b).	inue. Section I		Public Ut) of the In	•	•	- ·		f 1935 or Sectio 40	n			
(Print or Type F	Responses)											
DANTZKER DAVID Syml			Symbol	2. Issuer Name and Ticker or Trading Symbol SURMODICS INC [SRDX]				5. Relationship of Reporting Person(s) to Issuer				
.							(Check all applicable)					
(Last)	(First)	(Middle)		Earliest Tra	ansaction			V Dimeter	100	0		
				fonth/Day/Year) 2/31/2014				X_ Director 10% Owner Officer (give title Other (specify				
	TTERMILL R		12/31/20	/14				below)	below)	· · ·		
(Street)			4. If Amer	4. If Amendment, Date Original				6. Individual or Joint/Group Filing(Check				
GREAT NE	CK, NY 1102	1	Filed(Mon	th/Day/Year)	I			Applicable Line) _X_ Form filed by Form filed by M				
OILLIII ILL		-						Person				
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ties Acc	uired, Disposed o	f, or Beneficial	lly Owned		
1.Title of Security (Instr. 3)	2. Transaction I (Month/Day/Ye	ear) Executi any	emed ion Date, if /Day/Year)	3. Transactic Code (Instr. 8) Code V		ispose	d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Common Stock	12/31/2014			A	486 <u>(1)</u>		\$ 22.1	8,655 <u>(2)</u>	D			

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

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.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	of	Number Expiration Date of (Month/Day/Year) Derivative Securities Acquired		Secur	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo
				(A) of Disposed of (D) (Instr. 3, 4, and 5)						Trans (Instr
			Code V		Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Reporting Owners

Reporting Owner Name / Address	Relationships						
I State and the second	Director	10% Owner	Officer	Other			
DANTZKER DAVID C/O WHEATLEY PARTNERS, L.P. 80 CUTTERMILL ROAD GREAT NECK, NY 11021	Х						
Signatures							
/s/ Bryan K. Phillips, on behalf of Davi Dantzker	id R.	01/05/2015					
<u>**</u> Signature of Reporting Person		Date					

Explanation of Responses:

- 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).
- The reporting person elected to receive vested deferred stock units (DSUs) in lieu of quarterly cash retainer payments. The DSUs are (1) settled in shares of the issuer's common stock as described below.
- The amount beneficially owned includes 4,207 restricted stock units (RSUs) that vest on service-based vesting dates and 3,948 DSUs that
- (2) are vested upon issuance, each of which will be settled in shares of the issuer's common stock on a 1 for 1 basis when the reporting persons' service as a director ends.

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.