

MELROSE KENDRICK B
Form 5
November 14, 2002

OMB APPROVAL
OMB Number: 3235-0362
Expires: September 30, 1998
Estimated average burden hours per response...1.0

**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, DC 20549**

FORM 5

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**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(f) of the Investment Company Act of 1940**

- Check box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).
- Form 3 Holdings Reported
- Form 4 Transactions Reported

<p>1. Name and Address of Reporting Person*</p> <p>Melrose Kendrick B.</p> <hr/> <p><i>(Last) (First) (Middle)</i></p>	<p>2. Issuer Name and Ticker or Trading Symbol</p> <p>SurModics, Inc. (SRDX)</p> <hr/>	<p>3. I.R.S. Identification Number of Reporting Person, if an entity (Voluntary)</p> <hr/>
<p>8111 Lyndale Avenue South</p> <hr/> <p><i>(Street)</i></p>	<p>4. Statement for Month/Year</p> <p>September, 2002</p> <hr/>	<p>5. If Amendment, Date of Original (Month/Year)</p> <hr/>
<p>Minneapolis MN 55420</p> <hr/> <p><i>(City) (State) (Zip)</i></p>	<p>6. Relationship of Reporting Person(s) to Issuer (Check All Applicable)</p> <p><input checked="" type="checkbox"/> Director <input type="checkbox"/> 10% Owner</p> <p><input type="checkbox"/> Officer <i>(give title below)</i></p>	<p>7. Individual or Joint/Group Reporting (Check Applicable Line)</p> <p><input checked="" type="checkbox"/> Form filed by One Reporting Person</p> <p><input type="checkbox"/></p>

Edgar Filing: MELROSE KENDRICK B - Form 5

Other (*specify below*)

Form filed by More
than One Reporting
Person

* If the form is filed by more than one reporting person, see instruction 4(b)(v).

Table I Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security <i>(Instr. 3)</i>	2. Transaction Date <i>(Month/Day/Year)</i>	2A. Deemed Execution Date, if any <i>(Month/Day/Year)</i>	3. Transaction Code <i>(Instr. 8)</i>	4. Securities Acquired (A) or Disposed of (D) <i>(Instr. 3, 4 and 5)</i>	5. Amount of Securities Beneficially Owned at the End of Issuer's Fiscal Year <i>(Instr. 3 and 4)</i>	6. Ownership Form: Direct (D) or Indirect (I) <i>(Instr. 4)</i>	7. Nature of Indirect Beneficial Ownership <i>(Instr. 4)</i>
---	--	--	--	---	--	--	---

(A)
or
Amount (D) Price

Common Stock	10/25/01		G	12,000 D None			
--------------	----------	--	---	---------------	--	--	--

Common Stock	12/28/01		G	408 D None	224,657		
--------------	----------	--	---	------------	---------	--	--

Table II Derivative Securities Acquired, Disposed of, or Beneficially Owned Continued
(e.g., puts, calls, warrants, options, convertible securities)

6. Date Exercisable and Expiration Date <i>(Month/Day/Year)</i>	7. Title and Amount of Underlying Securities <i>(Instr. 3 and 4)</i>	8. Price of Derivative Security <i>(Instr. 5)</i>	9. Number of Derivative Securities Beneficially Owned at End of Year <i>(Instr. 4)</i>	10. Ownership of Derivative Security: Direct (D) or Indirect (I) <i>(Instr. 4)</i>	11. Nature of Indirect Beneficial Ownership <i>(Instr. 4)</i>
Date Exercisable	Expiration Date	Title	Amount or Number of Shares		
(1)	5/17/09	Common Stock	9,000	None	9,000 D
(2)	9/18/05	Common Stock	40,000	None	40,000 D
(3)	9/18/10	Common Stock	2,000	None	2,000 D
(4)	11/21/11	Common Stock	1,000	None	1,000 D

Explanation of Responses:

- (1) Exercisable in annual increments of 1,800 shares each, commencing 5/17/99.
- (2) Exercisable in annual increments of 8,000 shares each, commencing 9/18/95.
- (3) Exercisable in annual increments of 400 shares each, commencing 9/18/00.
- (4) Exercisable in annual increments of 200 shares each, commencing 11/21/01.

/s/ Kendrick B. Melrose

November 13, 2002

**Signature of Reporting Person
Kendrick B. Melrose

Date

Edgar Filing: MELROSE KENDRICK B - Form 5

** 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 provided 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.

Page 4