MIMEDX GROUP, INC.

Form 4

February 29, 2016

# FORM 4

### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

**SECURITIES** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

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**OMB APPROVAL** 

response...

if no longer subject to Section 16. Form 4 or

Form 5 obligations may continue.

Check this box

See Instruction

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

1(b).

(Print or Type Responses)

1. Name and Address of Reporting Person \* Haden Alexandra O

2. Issuer Name and Ticker or Trading Symbol

MIMEDX GROUP, INC. [MDXG]

5. Relationship of Reporting Person(s) to

Issuer

(Last) (First)

(Middle)

3. Date of Earliest Transaction

(Month/Day/Year)

02/25/2016

(Check all applicable) Director 10% Owner

General Counsel & Secretary

Other (specify X\_ Officer (give title below)

C/O MIMEDX GROUP, INC., 1775 WEST OAK COMMONS CT.

> (Street) 4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

Person

MARIETTA, GA 30062

(City)	(State) (Z	Zip) Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed	of, or Beneficia	lly Owned
1.Title of	2. Transaction Date	3. 4. Securities				5. Amount of	6. Ownership	7. Nature of	
Security (Instr. 3)	(Month/Day/Year)	TransactionAcquired (A) or Code Disposed of (D)			))	Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
		(Month/Day/Year) (Instr. 8) (Instr. 3, 4 and 5)			5)	Owned Following	Ownership (Instr. 4)		
					(A) Re		Reported Transaction(s)	(Instr. 4)	(mstr. i)
			Code V	Amount		Price	(Instr. 3 and 4)		
Common Stock	02/25/2016		F	726 (1)	D	\$0	72,802	D	
Common Stock	02/25/2016		F	1,670 (1)	D	\$0	71,132	D	
Common Stock							3,300	I	By Spouse

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

SEC 1474 (9-02)

#### Edgar Filing: MIMEDX GROUP, INC. - Form 4

#### number.

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

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9. Nu
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration D	piration Date		ınt of	Derivative	Deriv
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	Secui
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8) Derivativ		e		Securi	ities	(Instr. 5)	Bene
		Derivative				Securities		(Instr. 3 and 4)		Owne		
		Security			Acquired							Follo
						(A) or						Repo
						Disposed						Trans
						of (D)						(Instr
						(Instr. 3,						
						4, and 5)						
										Amount		
							Date	Expiration	Title	or Number		
							Exercisable	Exercisable Date	Title	of		
					Codo V	(A) (D)				Shares		
					Code v	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address Relationships

Director 10% Owner Officer Other

Haden Alexandra O C/O MIMEDX GROUP, INC. 1775 WEST OAK COMMONS CT. MARIETTA, GA 30062

General Counsel & Secretary

## **Signatures**

/s/ Alexandra O. 02/29/2016

\*\*Signature of Reporting 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).
- (1) Shares withheld by the Company to satisfy tax withholding requirements on vesting of restricted stock.

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.

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