FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| OMB APPROVAL | | | | | | | | | |
|---------------------|-----------|--|--|--|--|--|--|--|--|
| OMB Number: | 3235-0287 | | | | | | | | |
| Estimated average b | urden | | | | | | | | |

0.5

hours per response:

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

| 1. Name and Address of Reporting Person* <u>Turner Scott M</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol MIMEDX GROUP, INC. [MDXG] | | | | | | | | | eck all app Dired | olicable) ctor | | Owner | |
|--|--|--|------------------|--|-----------------|--|--|---|------|--|----------------|--|---|---|--|---|--|---------------------------------------|--|
| (Last) (First) (Middle) 1775 WEST OAK COMMONS COURT | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 12/11/2018 | | | | | | | | | helov | Officer (give title Offbelow) below) SVP, Operations & Procure | | , l | |
| (Street) MARIET (City) | | | 30062 Zip) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) 12/13/2018 | | | | | | | | Line | e) <mark>X</mark> Forn Forn | ual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | | Execution Date, | | Code (Instr. 5) | | | | Secur Benef | icially d Following | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | | |
| | | | | | | | | | Code | v | Amount | | N) or D) | Price | Trans | action(s) 3 and 4) | | (11150.4) | |
| Common Stock 12/11/2 | | | | | /2018 | 2018 | | A | | 10,000 | (1) | Α | \$1.5 | 4 70 | 70,180 ⁽²⁾ | | | | |
| | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | | | | | | | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | Execution if any | | | | saction (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | | 6. Date Exercisable and Expiration Date (Month/Day/Year) Date Expiration Date Expiration Date | | Amount of Securities Underlying Derivative Security (Instr. and 4) | | tr. 3 | s. Price of Derivative Gecurity Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownershi Form: Direct (D) or Indirec (I) (Instr. 4 | Beneficial Ownership (Instr. 4) | |

Explanation of Responses:

- 1. This amendment is filed to correct the number of shares acquired.
- $2.\ This\ includes\ 54,067\ shares\ of\ unvested\ restricted\ stock.$

Remarks:

/s/ Scott M. Turner

12/13/2018

** Signature of Reporting Person

Date

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

- * 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.