SEC Form 4
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## FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 20549

OMB APPROVAL

-	-									
OMB Number:	3235-0287									
Estimated average burden										
hours per response:	0.5									

Date			2. Transactio Date (Month/Day/	-	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8) Code		4. Securities A Disposed Of ( 5) Amount			5. Amount of Securities Beneficially Owned Followia 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)	
		able I - No	n-Derivati	ive S	Securities Acq	uired,	, Dis	posed of, o	or Ber	eficially	y Owned				
(City)	(State)	(Zip)								Person	WOR		porting		
(Street) MARIETTA GA 30062											6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting				
(Last) (First) (Middle) 1775 WEST OAK COMMONS COURT NE					6/2020			Chief Financial Officer							
1. Name and Addr	er M		2. Issuer Name and Ticker or Trading Symbol <u>MIMEDX GROUP, INC.</u> [ MDXG ] 3. Date of Earliest Transaction (Month/Day/Year)							k all applicable) Director Officer (give t below)	orting Person(s) to Issuer 10% Owner itle Other (specify below)				
		*			ction 30(h) of the In				.940	E Dol	ationship of Don	orting	a Doroon(o) to I	loouor	
	y continue. See				nt to Section 16(a)					934	h	ours p	per response:	0.5	

Common	1 Stock		07/06/2	2020		A	3	35,211 <sup>(1)</sup>	A	<b>\$5.4</b>	84	4,506	D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned     (e.g., puts, calls, warrants, options, convertible securities)															
1. Title of Derivative	2. Conversion		3A. Deemed Execution Date.	4. Transaction	5. Number of		Exercisal		7. Title and Amount of			9. Number o derivative		rship	11. Nature of Indirect

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Deriv Secu Acqu (A) o Dispo of (D (Insti	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) 6. Date Exercisable and Expiration Date (Month/Day/Year) 9. Complete Securities (Month/Day/Year) 9. Complete (Month/Day/Year) 9. C		Amount of		nount of curities Security derlying rivative curity (Instr. 5)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Reflects the satisfaction of performance criterion of grant made on December 16, 2019

## **Remarks:**

<u>/s/ David Wisniewski, as</u> <u>attorney in fact for Peter M.</u>

07/07/2020

Date

<u>Carlson</u> \*\* Signature of Reporting Person

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.