FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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| Check this box if no longer subject |
|-------------------------------------|
| to Section 16. Form 4 or Form 5 |
| obligations may continue. See |
| Instruction 1(b). |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* WRIGHT TIMOTHY R | | | | | 2. Issuer Name and Ticker or Trading Symbol MIMEDX GROUP, INC. [MDXG] | | | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|--|---|---|-----------------|---|--|---|--|---------------------|---|---|-------------------------------|---|-------------------------|---|--|---|---|--|--|
| | | | | | | | | | <u>, 11</u> | | | , | | 2 | X Direct | tor | | 10% O | wner | |
| (Last) | | Date of Earliest Transaction (Month/Day/Year) | | | | | | | | ; | X Office below | r (give title | | Other (below) | specify | | | | | |
| (Last) (First) (Middle) 1775 WEST OAK COMMONS COURT NE | | | | | 06/07/2020 | | | | | | | | C | Chief Executive Officer | | | | | | |
| (Street) | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | | |
| MARIET | TTA GA | A 3 | 0062 | | | | | | | | | | Line | • | Form filed by One Reporting Person | | | | | |
| (City) | (St | ate) (2 | Zip) | | | Form filed by More than One Repo Person | | | | | | | | | orting | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | Execution Date, | | | 3. Transaction Code (Instr. 8) 4. Securities Acqu Disposed Of (D) (II 5) | | | | | d Securit Benefic Owned | 5. Amount of Securities Beneficially Owned Following Reported | | n: Direct or Indirect nstr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or | Price | Transa | action(s) 3 and 4) | | | (111501.4) | |
| Common Stock 06 | | | | | /2020 | | | | F ⁽¹⁾ | | 89,591 |] | D | \$3.5 | 59 | 592,227 | | D | | |
| | 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) | 3A. Deer Execution if any (Month/I | | 4. Transaction Code (Instr. 8) | | of Deriv | rative rities ired r osed) | Expiration Day/Y | | te Amo ear) Secu Undo Deri Secu | | Title and mount of ecurities nderlying erivative ecurity (Instr. and 4) | | 3. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | y | 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 | Amo or Num of Shai | ber | | | | | | |

Explanation of Responses:

1. This transaction represents the netting of shares to satisfy applicable witholding taxes upon the vesting of previously-granted restricted stock.

Remarks:

<u>David Wisniewski</u>, as attorney 06/08/2020 in fact for Timothy R. Wright

** 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.