FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigtoii,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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* DOUG RICE					2. Issuer Name and Ticker or Trading Symbol MIMEDX GROUP, INC. [MDXG]									eck all applic Directo	able) r	g Pers	10% Ow	ner	
(Last) 1775 WF	,	irst)	(Middle) URT NE			3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024								V Officer below)	pecify				
(Street) MARIET			30062		4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line	ndividual or Joint/Group Filing (Check Applicable e) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(5	tate)	(Zip)		R	Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.								to					
		Tab	le I - Nor	n-Deriv	ativ	e Se	curities	s Ac	quired,	Dis	posed o	of, or E	3ene	ficiall	y Owned				
1. Title of Security (Instr. 3) 2. Transi Date (Month/L				2A. Deemed Execution Date of the interpolation of t		Date,	e, Transaction Dis		Disposed	ecurities Acquired (A) posed Of (D) (Instr. 3, 4		(A) or 3, 4 and	5. Amou Securitie Beneficia Owned F	es For ially (D) Following (I) (n: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership Instr. 4)		
									Code	v	Amount	(A (D	A) or D)	Price	Transact (Instr. 3 a	ion(s)			(1130.4)
Common Stock 03/v				03/01	1/2024			Α		58,478 ⁽¹⁾ A		\$ <mark>0</mark>	160,678			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. Deeme Execution if if any (Month/Day	Date, T	4. Transaction Code (Instr. 8)		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)			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		ecurity 4)	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisab		Expiration Date	Title	O N O	umber					
Stock Options	\$8.63	03/01/2024			A		70,755		(2)		03/01/2031	Commo		0,755	\$0	164,75	55	D	

Explanation of Responses:

- 1. Represents grant of restricted stock which vests fully on the third anniversary of the grant, subject to the reporting person's continued employment as specified in the Restricted Stock Unit Agreement.
- 2. The options granted to the reporting person shall vest 25% on each anniversary of the grant date, subject to the reporting person's continued employment as specified in the Nonqualified Stock Option Agreement.

Remarks:

William F. Hulse, as attorneyin-fact for Doug Rice

03/05/2024

** 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.