Instruction 1(b)

FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPROVAL								
OMB Number:	3235-0362							
Estimated average burden								
hours per response:	1.0							

Form 3	Holdings Repo	rted.												nour	s per i	esponse.	1.0	
Form 4	Transactions R	eported.	File	d pursuant to or Sectior					ities Exchai ompany Act									
1. Name and Address of Reporting Person* <u>KOOB CHARLES E</u>				2. Issuer Name and Ticker or Trading Symbol MIMEDX GROUP, INC. [MDXG]							5. Relationship of Repo (Check all applicable) X Director			ng Pe	. ,	Issuer Owner		
(Last)	(Fir		Лiddle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2017						Year)	Officer (give til below)			le Oth belo		r (specify v)		
1775 WEST OAK COMMONS COURT, NE				4. If Amendment, Date of Original Filed (Month/Day/Year)					′ I	6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street) MARIETTA GA 30062											X F		led by Mo		Reporting Person e than One Reporting			
(City)	(Sta	ate) (Z	Zip)															
		Table	e I - Non-Deriv	ative Sec	uritie	s Ac	quire	d, Di	sposed o	of, or	Benefici	ally Ov	ned					
Date			2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Ins					or Disposed	Securiti Benefic		ies Ow		ership : Direct	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						, 6,		Amount		(A) or (D)	Price	Issu	Issuer's Fiscal Year (Instr. 3 and		Indirect (I) (Instr. 4)			
Common Stock			11/22/2017		G ⁽		(1)	4,000		D	\$ <mark>0</mark>	1	1,460,628			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. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Numof Deriv Securi Acqui (A) or Dispo of (D) (Instrand 5	ative rities ired osed	Expira (Mont	ation Da	n Date Aray/Year) Se Ur De Se an		Amount of Securities		Derivative der Security Security Instr. 5) Ber Ow Fol Rep Tra		. Number of erivative securities seneficially byned ollowing seported ransaction(s) nstr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

1. This transaction was a gift.

Remarks:

Alexandra O. Haden as power of attorney for Charles E. Koob

02/06/2018

** 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.