FORM 4	4
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(Print or Type Responses)

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

#### UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

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### STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

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 P DeVinney Erick Wayne	2. Issuer Name <b>and</b> AxoGen, Inc. [AX		Гradi	ng Symbo	ol	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
(Last) (First) 13631 PROGRESS BOULEVA	DD CLUTTE 100	3. Date of Earliest T 03/14/2017	ransaction (	Mont	h/Day/Ye	ear)		X Officer (give title below) Other (specify below) VP, Clinical&Translational Sc			
(Street) ALACHUA, FL 32615	4. If Amendment, Date Original Filed(Month/Day/Year)						6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City) (State)	(Zip)	T	able I - Nor	-Der	ivative S	ecuritie	s Acqu	ired, Disposed of, or Beneficially Owned			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea			Code (Instr. 8)					Transaction(s)	Ownership Form:	Beneficial	
		(Month/Day/Year)	Code	Code V Amount (A) or (D) Price			Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)			
Common Stock	03/14/2017		М		4,659	А	\$ 0.27	4,659	D		
Common Stock 03/14/2017			М		359	А	\$ 0.27	5,018	D		

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

SEC 1474 (9-02)

Persons who respond to the collection of information SEC 147 contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

(e.g., puts, calls, warrants, options, convertible securities)															
1. Title of	2.	3. Transaction	3A. Deemed	4.		5. Num	ber	6. Date Exerc	isable and	7. Title and		8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction of		Expiration Date		Amount of		Derivative	Derivative	Ownership	of Indirect		
Security	or Exercise	(Month/Day/Year)		Code	Derivative		(Month/Day/Year)		Underlying		Security	Securities	Form of	Beneficial	
(	Price of		(Month/Day/Year)	(Instr. 8)	)	Securit								Derivative	-
	Derivative					Acquir	ed			(Instr. 3 and 4)					(Instr. 4)
	Security					(A) or							0	Direct (D)	
						Dispos	ed						Reported Transaction(s)	or Indirect	
						of (D) (Instr. 3	2 1							(1) (Instr. 4)	
						and 5)	, <b>-</b> ,						(11150.4)	(11150.4)	
						unu <i>v</i> )					Amount				
											or				
								Date	Expiration	Title	Number				
								Exercisable	Date		of				
				Code	V	(A)	(D)				Shares				
Employee															
Stock															
Option	\$ 0.27	03/14/2017		М		4,659		04/25/2008	04/25/2017	Common	4,659	\$ 0	0	D	
-	\$ 0.27	03/14/2017		191		ч,057		04/23/2008	04/23/2017	Stock	ч,057	φυ	U	D	
(right to															
purchase)															
Employee															
Stock										C					
Option	\$ 0.27	03/14/2017		М		359		12/06/2008	12/06/2017	Common	359	\$ 0	0	D	
(right to	÷ ••• <b>=</b> /					2.2.7				Stock		÷Ŭ	5	-	
purchase)															
purchase)															

# **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director 10% Owner		Officer	Other				
DeVinney Erick Wayne 13631 PROGRESS BOULEVARD SUITE 400 ALACHUA, FL 32615			VP, Clinical&Translational Sc					

## Signatures

/s/Erick DeVinney	03/14/2017
Signature of Reporting Person	Date

## **Explanation of Responses:**

\* 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.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.