FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL
OMB 3235Number: 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

Print or Type Resp	oonses)									
1. Name and Addr Johnston Lee Ro	ess of Reporting Pers obert Jr	2. Issuer N Symbol AxoGen, l	ame and T		r Tradin	g	5. Relationship of Rep Issuer (Check all			
(Last) C/O AXOGEN, PROGRESS BO 400	(First) (Middl INC., 13631 DULEVARD, SUI'	(Month/Day	/Year)	nsaction			Director 10% Owner X Officer (give title Other (specify below) below) Chief Financial Officer			
ALACHUA, FL	(Street)	4. If Amend Filed(Month/		Origin	al		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	Table I	- Non-Deri	ivative	Securit	ies Acqu	ired, Disposed of, or	Beneficially	Owned	
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year	Code (Instr. 8)	on Acc Dis (Ins	Disposed of (D) (Instr. 3, 4 and 5) (A) or		5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
Reminder: Report of directly or indirectl	on a separate line for e	each class of securit	ies benefici	ially ow	ned					
	Table II -	Derivative Securit	ies Acquire	inforn requii curre	nation red to i ntly va	contain espond lid OME	and to the collection led in this form are a dunless the form dis discontrol number.	not	SEC 1474 (9-02)	
	(e.g., puts, calls, w	arrants, op	ptions,	convert	ible secu	rrities)			
1. Title of 2.	3. Transaction	3A. Deemed	4.				Date Exercisable and		e and Amount	8. Price

1. Title of	2.	Transaction	3A. Deemed	4.		5. Number	r of	Date Exercisal	ole and	Title and	Amount	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transac	tion	n Derivative		Expiration Date		of Underlying		Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code		Securities		(Month/Day/Year)		Securities		Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Acquired (i (A)		(Instr. 3 and 4) (In		(Instr. 5)	Beneficially	Derivative	Ownership	
	Derivative					or Dispose	ed						Owned	Security:	(Instr. 4)
	Security					of (D)							Following	Direct (D)	
						(Instr. 3, 4	ŀ,						Reported	or Indirect	
						and 5)							Transaction(s)	(I)	
											Amount		(Instr. 4)	(Instr. 4)	
								Date	Expiration	mr. d	or				
								Exercisable	Date	Title	Number				
				Code	V	(A)	(D)				of Shares				
Stock	A 2 50	06/04/0044				175,000		(1)	0.510.110.00.1	Common	455.000		155,000	,	
Option	\$ 2.58	06/01/2014		Α		(1)		06/01/2015 ⁽¹⁾	06/01/2021	Stock	1/5,000	\$0	175,000	D	

Reporting Owners

Reporting Owner Name / Address		Relationships						
		10% Owner	Officer	Other				
Johnston Lee Robert Jr C/O AXOGEN, INC. 13631 PROGRESS BOULEVARD, SUITE 400 ALACHUA, FL 32615			Chief Financial Officer					

Signatures

/s/ Lee Robert Johnson, Jr.	06/03/2014
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).
- All shares pursuant to the options will be fully vested on June 1, 2018 (4 years from the option grant date) based upon a vesting schedule (1) whereby 25% of the aggregate shares vest on June 1, 2015 (12 months from the option grant date) and an additional 12.5% of aggregate

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.