# FORM 4

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

OMB APPROVAL					
	5-0287				
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).

#### 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

(Print or Type	e Responses)															
1. Name and Address of Reporting Person *- Rudelius Robert James				2. Issuer Name and Ticker or Trading Symbol Axogen, Inc. [AXGN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner				
(Last) (First) (Middle) 13631 PROGRESS BOULEVARD, SUITE 400				3. Date of Earliest Transaction (Month/Day/Year) 06/01/2020							_	Officer (give	e title below)	Oth	er (specify belov	v)
(Street) ALACHUA, FL 32615				4. If Amendment, Date Original Filed(Month/Day/Year) 06/03/2020								6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting PersonForm filed by More than One Reporting Person				
(City) (State) (Zip)				Table I - Non-Derivative Securities Acqui						s Acquire	ired, Disposed of, or Beneficially Owned					
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if ) any (Month/Day/Year)		ate, if (		4. Securities Acqu (A) or Disposed o (Instr. 3, 4 and 5)						Ownership of Form:	Beneficial		
					i ear)	Code	e V	Amoun	(A) or (D)	Price	(msu. 3 and 4)			(	Ownership (Instr. 4)	
1. Title of Derivative Conversion Security or Exercise (Month/Day/Year) any		3A. Deemed Execution Date, if	(e.g., puts, calls, 4. 5. if Transaction of Code Sear) (Instr. 8) A		5. Num of Deri Securit Acquire or Disp	rities Acquirec warrants, opti Number 6. 1 Derivative Ex curities (M quired (A) Disposed		Expiration Date of U (Month/Day/Year) Sec		control	number. wned and Amount clying	8. Price of Derivative Security (Instr. 5)	f 9. Number of e Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	f 10.		
	Security					of (D) (Instr. 3, 4, and 5)								Direct (I or Indire (I) (I) (Instr. 4)	ct	
				Code	V	(A)	(D)	Date Exercisal		oiration e	Title	Amount or Number of Shares		(110111 1)	(IIISUI I)	
Stock Option (right to purchase)	\$ 9.72	06/01/2020		A		12,60:	5	(1)	06	/01/2030	Commo Stock	on 12,605	\$ 0	12,605	D D	
Restricted Stock Units	(2)	06/01/2020		A		6,173 (3)		(1)		(1)	Commo		\$ 0	6,173 <sup>(3</sup>	D D	

### **Reporting Owners**

	Relationships					
Reporting Owner Name / Address	Director	10% Owner	Officer	Other		
Rudelius Robert James 13631 PROGRESS BOULEVARD SUITE 400 ALACHUA, FL 32615	X					

#### **Signatures**

/s/Robert Rudelius	06/12/2020
**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).

- Annual equity grant for service as Director on the Axogen, Inc. Board of Directors. The number of shares pursuant to the equity grant is based on a \$120,000 valuation as of the grant date
- (1) and vests on June 1, 2021, one year from the anniversary of the grant date. One-half of the annual equity grant value is in the form of non-qualified stock options and One-half of the annual equity grant value is in the form of restricted stock units.
- (2) Each restricted stock unit represents a contingent right to receive one share of Axogen, Inc. common stock.
  - The original Form 4, filed June 3, 2020, incorrectly stated the number of derivative securities (Column 5), the number of shares (Column 7) and number of derivatives securities
- (3) beneficially owned following reported transaction (Column 9) for both the Stock Options and Restricted Stock Units. Footnote 1 has also been amended to reflect the accurate number of stock options and restricted stock units.

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.