Section 16. Form 4 or

Form 5 obligations

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

OMB Number: Estimated average burden hours per **SECURITIES** response..

OMB APPROVAL

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may continue. See Instruction 1(b).	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 of Section 30(h) of the Investment Company Act of 1940

Print or Type Respon	nses)									
Name and Addres Freitag Gregory C	Symbol	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) (C/O AXOGEN, II PROGRESS BOU 100	(Month/Da	3. Date of Earliest Transaction (Month/Day/Year) 12/26/2011					X_ Officer (give title Other (specify below) below) CFO			
ALACHUA, FL 3		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)	Table I	Table I - Non-Derivative Securities Acqui					ired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)	Date (Month/Day/Year)	2A. Deemed Execution Date, i any (Month/Day/Yea	Code		4. Securi Acquired Disposed (Instr. 3,	l (A) of (I 4 and (A) or	O)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	Ownership Form: Direct (D)	7. Nature of Indirect Beneficial Ownership (Instr. 4)

Reminder: Report on a separate line for each class of securities beneficial lirectly or indirectly.	ially owned
	Persons who respond to the collection of SEC 1474
	information contained in this form are not (9-02)
	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.	Transaction	3A. Deemed	4.		5. Numb	er	Date Exercisals	ole and	Title and	Amount	8. Price of	Number of	10.	Nature	1
Derivative	Conversion	Date	Execution Date, if	Transact	tion	of		Expiration Date		of Underlyi	ng	Derivative	Derivative	Ownership	of Indirect	
Security	or Exercise	(Month/Day/Year)	any	Code		Derivativ	re	(Month/Day/Yea	r)	Securities	_	Security	Securities	Form of	Beneficial	1
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Securitie	s			(Instr. 3 and	14)	(Instr. 5)	Beneficially	Derivative	Ownership	1
	Derivative					Acquired	l						Owned	Security:	(Instr. 4)	ı
	Security					(A) or							Following	Direct (D)		1
						Disposed	l of						Reported	or Indirect		ı
						(D)							Transaction(s)	(I)		ı
						(Instr. 3,	4,						(Instr. 4)	(Instr. 4)		ı
						and 5)										ı
											Amount					ı
								ъ.	F		or					ı
									Expiration	Title	Number					ı
								Exercisable	Date		of					ı
				Code	V	(A)	(D)				Shares					ı
Employee																ı
Stock										_						ı
Option	\$ 2.74	12/26/2011		Α		92,000		12/26/2012 ⁽¹⁾	12/26/2018	Common Stock	92 000	\$0	92,000	D		ı
	Ψ 2.74	12/20/2011		71		72,000		12/20/2012	12/20/2010	Stock	22,000	ΨΟ	72,000	D		ı
(right to																ı
buy)																1

Reporting Owners

Domontina Oranon Nome / Adduces	Relationships						
Reporting Owner Name / Address		10% Owner	Officer	Other			
Freitag Gregory Gene C/O AXOGEN, INC. 13859 PROGRESS BOULEVARD, SUITE 100 ALACHUA, FL 32615	X		CFO				

Signatures

/s/Greg Freitag	12/28/2011
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 December 26, 2015 (4 years from the option grant date) based upon a vesting (1) schedule whereby 25% of the aggregate shares vest on December 26, 2012 (12 months from the option grant date) and an additional 12.5%

of aggregate shares each 6 months thereafter.

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.