FORM 4	4
--------	---

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

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden hours per response... 0.5

02)

#### 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 Responses)												
1. Name and Address of Reporting Person – Leach Kevin			2. Issuer Name <b>and</b> Ticker or Trading Symbol AxoGen, Inc. [AXGN]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner			
(Last) 13631 PROGRESS	(First) BOULEVA	(Middle) RD, SUITE 400	3. Date of Earliest Transaction (Month/Day/Year) 10/07/2016						X Officer (give title below) Other (specify below) Vice President Marketing			
(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)	Table I - Non-Derivative Securities Acqu					es Acqu	ired, Disposed of, or Beneficially Owned			
1.Title of Security (Instr. 3)		Date (Month/Day/Year)	Execution Date, if	Code (Instr. 8)	ction	(A) or Disposed of (D)		d of	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		Beneficial Ownership	
				Code	v	Amount	(A) or (D)	Price		or Indirect (I) (Instr. 4)	(Instr. 4)	
Common Stock		10/07/2016	10/07/2016	Р		2,000 (1)	А	\$ 7.5 (1)	2,000	D		

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

Persons who respond to the collection of information SEC 1474 (9contained 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

( <i>e.g.</i> , puts, calls, warrants, options, convertible securities)														
1. Title of	2.	3. Transaction	3A. Deemed	4.	5.	Numbe	r 6. Date Exe	rcisable	7. Tit	le and	8. Price of	9. Number of	10.	11. Nature
Derivative	Conversion	Date	Execution Date, if	Transaction	n of		and Expirat	ion Date	Amo	unt of	Derivative	Derivative	Ownership	of Indirect
Security	or Exercise	(Month/Day/Year)	any	Code	De	erivativ	e (Month/Day	/Year)	Unde	rlying	Security	Securities	Form of	Beneficial
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Se	curities			Secur	rities	(Instr. 5)	Beneficially	Derivative	Ownership
	Derivative				A	cquired			(Instr	. 3 and		Owned	Security:	(Instr. 4)
	Security				(A	) or			4)			Following	Direct (D)	
					Di	isposed						Reported	or Indirect	
					of	(D)						Transaction(s)	(I)	
					~	nstr. 3,						(Instr. 4)	(Instr. 4)	
					4,	and 5)								
										Amount				
							Date	Evaluation		or				
							Exercisable	Expiration Date	Title	Number				
							Exercisable	Date		of				
				Code V	( /	A) (D	1			Shares				

# **Reporting Owners**

Denseting Operation Name (Address	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
Leach Kevin 13631 PROGRESS BOULEVARD SUITE 400 ALACHUA, FL 32615			Vice President Marketing					

### **Signatures**

/s/Kevin Leach	10/14/2016
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).

The reporting person purchased these shares in his individual capacity and not through any directed share or other formal program in connection with an underwritten (1) registered public offering of the Company. On October 7, 2016, the trade date for the public offering, the closing sale price reported by NASDAQ was \$9.15 per share. The public offering closed on October 13, 2016 and the closing sale price reported by NASDAQ on such date was \$8.72 per share.

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.