## FORM 4

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

OMB APPROVAL				
OMB Number:	3235-0287			
Estimated average	burden			
ours per respons	e 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

1. Name and Address of Reporting Person* Rudelius Robert James		2. Issuer Name and Ticker or Trading Symbol Axogen, Inc. [AXGN]					5	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) 09/30/2020					•	Office	r (give title belo	ow)	Other (specify b	elow)			
(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					Acquii	lired, Disposed of, or Beneficially Owned						
1.Title of S (Instr. 3)	Instr. 3) Date		Transaction tte Ionth/Day/Year)	2A. Deemed Execution Date any (Month/Day/Y	e, if (	3. Transa Code (Instr. 8)		(A) or I	Disposed of 3, 4 and 5)  (A) or	(D) I	Beneficial	t of Securiti ly Owned F Fransaction( nd 4)	ollowing (s)	\ /	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Reminder:	Report on a s	separate line for e	ach class of secur	rities beneficial	ly owi	ned direc	Perso	ons wh	no respon			ction of inf			1474 (9-02)
Reminder:	Report on a s	separate line for e	Table II -	Derivative Sec	uritie	es Acquir	Perso conta the fo	ons whained i	no respon n this forr splays a c	n are urren ficiall	not requ tly valid	ired to res	formation spond unle trol numbe	SS	1474 (9-02)
		•	Table II -	Derivative Sec (e.g., puts, calls	urities	es Acquir Tants, o	Perso conta the for	ons whained i orm dis sposed conver	no respon n this forr splays a c of, or Bene tible secur	n are urren ficiall ities)	not requally valid	ired to res	spond unle trol numbe	ss	
1. Title of		3. Transaction	Table II - (  3A. Deemed Execution Daar) any	Derivative Sec	urities, war  5. ion N  of D  Sc A  (A	es Acquir crants, of	Persoconta the for the for ed, Dispotions, 6. Da and E (Mon	ons whained in orm disconnections of the convertage of the convert	no respon n this forr splays a c of, or Bene tible secur cisable on Date	ficiallities) 7. Tit Amo Unde Secur	not requitly valid  y Owned  tle and unt of erlying	OMB conf	spond unle	f 10. Ownersi Form of Derivati Security Direct ( or Indire	11. Natu of Indire Beneficie Ownersh (Instr. 4)

#### **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	10/01/2020
**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)

#### Remarks:

Mr. Rudelius ceased to be a Director as of September 30, 2020.

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.