## FORM 4

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

OMB APPROVAL
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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 Ty	pe Response	s)														
1. Name and Address of Reporting Person* MARIANI PETER J				2. Issuer Name and Ticker or Trading Symbol Axogen, Inc. [AXGN]							Direct	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner				
(Last) (First) (Middle) 13631 PROGRESS BOULEVARD, SUITE 400				3. Date of Earliest Transaction (Month/Day/Year) 12/27/2020							X Office	X Officer (give title below) Other (specify below)  Chief Financial Officer				
(Street)				4. If Amendment, Date Original Filed(Month/Day/Year)							_X_ Form fil	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting Person				
ALACH (City	UA, FL 32	(State)	(Zip)													
(City	)	(State)	(Еф)			Table	e I - No	n-De	rivative	Securiti	es Ac	quired, Disp	osed of, or I	Beneficially	Owned	
(Instr. 3) Date		2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, any (Month/Day/Yea		if C	(Instr. 8)		4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			D) Beneficia Reported	Beneficially Owned Following Reported Transaction(s)			7. Nature of Indirect Beneficial	
					ar)	Code	V	Amour	(A) or (D)	Pric		(Instr. 3 and 4)		\ /	Ownership (Instr. 4)	
Common Stock			12/27/2020				A		5,250 (1)	A	(1)	11,669	11,669		D	
Common Stock			12/29/2020				S		1,293 (2)	D	\$ 17.8	10,376	10,376		D	
Reminder:	Report on a s	separate line for	r each class of secur	rities be	eneficially	owne	ed direc	tly or	indirect	ly.						
								con	tained i	n this f	orm a	to the collectory are not requ rently valid	uired to res	spond unle	ss	1474 (9-02)
					tive Secur							cially Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		n 3A. Deemed Execution Da any	te, if T	ear) 4. 5. Transaction Code of (Instr. 8) Deri Secu Acque (A) of Uisp of (I (Instr. 8) to (Instr. 8)		erivative curities equired or sposed	6. Date Exercis and Expiration (Month/Day/Ye		cisable on Date	7. A U S	Title and amount of Inderlying ecurities (instr. 3 and instr. 3 and instruction in the instruction	Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)	Owners Form of Derivati Security Direct ( or Indire	Beneficia Ownersh (Instr. 4)
					Code V	7 (A	A) (D)		e rcisable	Expirati Date	ion T	Amount or Number of Shares				

### **Reporting Owners**

	Relationships							
Reporting Owner Name / Address	Director	10% Owner	Officer	Other				
MARIANI PETER J 13631 PROGRESS BOULEVARD SUITE 400 ALACHUA, FL 32615			Chief Financial Officer					

#### **Signatures**

/s/Peter Mariani	12/30/2020
**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).
- (1) This reflects the number of restricted stock units that became vested as of December 27, 2020.
  - Represents the number of shares required to be sold by the reporting person to cover tax withholding obligations in connection with the vesting of restricted stock units
- (2) granted on December 27, 2018. This sale is mandated by the Issuer's election under its equity incentive plans to require the satisfaction of tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary trade by the reporting person.

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.