SEC For	m 4 FORM	4	UNITE	D ST	ATES	S SI	ECU	RITI	ES AN	ND	ЕХСНА	NGI	EC	омм	ISSION				
							_		ngton, D			OMB APPROVAL							
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					ENT OF CHANGES IN BENEFICIAL OWNE led pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940										SHIP OMB Number: 3 Estimated average burder hours per response:			3235-0287 n 0.5	
transac contrac the pur securit intende defens	chase or sale of ies of the issue ed to satisfy the	e pursuant to a r written plan for of equity r that is			U	000	1011 30(1		investin			. 01 134	.0						
1. Name and Address of Reporting Person [*] Khayal Tamer I						2. Issuer Name and Ticker or Trading Symbol <u>TransMedics Group, Inc.</u> [TMDX]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify				wner
(Last) (First) (Middle C/O TRANSMEDICS GROUP, INC. 200 MINUTEMAN ROAD						3. Date of Earliest Transaction (Month/Day/Year) 11/11/2024									☑ Officer (give title below) Other (specify below) Chief Commercial Officer				specity
(Street) ANDOV	'ER M	A	01810			4. If Amendment, Date of Original Filed (Month/Day/Year)									 6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person 				
(City) (State) (Zip)																			
		Tab	le I - No	on-Deriv	vative	Se	curiti	es Ac	quired	l, Di	sposed o	of, or	Ben	eficial	ly Owned	ł			
1. Title of Security (Instr. 3)				2. Transacti Date (Month/Day		/Year) if a		A. Deemed kecution Date, any lonth/Day/Year)		ction Instr.	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Benefici Owned I	es ally Following	Form (D) o	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 11/11				2024	024					1,458	1	4	\$38.4	22,301			D		
Common Stock 11/11/20				2024	024					1,458 D \$9		\$90.04	.(2) 20,843			D			
		т	able II								oosed of converti				/ Owned				
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	on 3A. Deemed Execution I		ed 4. Date, Transa Code		5. Nu of Deriv Secu Acqu (A) o Disp of (D	umber vative urities uired or osed)) r. 3, 4		Exerci	sable and te	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	lly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date		Expiration	Title		Amount or Number of Shares					

Explanation of Responses:

\$38.46

Stock Option (Right to

Buy)

1. The reported transactions were effected pursuant to a Rule 10b5-1 trading plan entered into on September 6, 2023.

2. The price reported is a weighted average price. These shares were sold in multiple transactions ranging from \$90.00 to \$90.10, inclusive. The Reporting Person undertakes to provide to the Issuer, any security holder of the Issuer or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range.

(3)

1,458

3. The option vests at a rate of 2.0833% of the total number of shares each month until the option is fully vested on February 24, 2025.

<u>By: /s/ Stephen Gordon,</u> Attorney-in-Fact	<u>11/13/2024</u>			
** Signature of Reporting Person	Date			

1,458

\$<mark>0</mark>

5,834

D

Common

Stock

02/24/2031

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

 * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

11/11/2024

** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

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Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.