FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

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* Hassanein Waleed H						2. Issuer Name and Ticker or Trading Symbol TransMedics Group, Inc. [TMDX]									k all app Direc	onship of Reporting Il applicable) Director Officer (give title		10% O	wner
(Last)	(Last) (First) (Middle) C/O TRANSMEDICS GROUP, INC.					3. Date of Earliest Transaction (Month/Day/Year) 09/07/2022								X	belov			Other (specify below) CEO	
200 MINUTEMAN ROAD																			
(Street) ANDOVER MA 01810					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person					.
(City)	,														Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3) 2. Transactic Date (Month/Day/					.	Execu if any		emed tion Date, n/Day/Year)		action Instr.		Acquired (A) of (D) (Instr. 3, 4		and 5) Securi Benefi		cially I Following	Form (D) or	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership
									Code	v	Amount	(A) or (D)	Price	е	Transa	saction(s) r. 3 and 4)			(Instr. 4)
Common Stock 09/07/20					022)22					2,277	D	\$:	55 ⁽²⁾	46	54,008		D	
Common Stock 09/08/20					022				S ⁽¹⁾		17,723	D	D \$55.37 ⁽³⁾		446,285			D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execu if any	eemed Ition Date, h/Day/Year)	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exerci	isable	Expiration Date	Title	Amount or Number of Shares	er					

Explanation of Responses:

- 1. The reported transactions were effected pursuant to a Rule 10b5-1 trading plan.
- 2. The price reported is a weighted average price. These shares were sold in multiple transactions ranging from \$55.00 to \$55.10, inclusive. The Reporting Person undertakes to provide to the Company, any security holder of the Company 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. The price reported is a weighted average price. These shares were sold in multiple transactions ranging from \$55.00 to \$55.90, inclusive. The Reporting Person undertakes to provide to the Company, any security holder of the Company 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.

Remarks:

/s/ Stephen Gordon, Attorney- 09/09/2022 in-Fact ** Signature of Reporting Person

Date

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

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.