SEC For	m 4 FORM	4 L	JNITE	D STA	TES	SE	ECUR	RITII	ES AND	ΡE	ХСНА	ANGE	ECO	омм	ISSION	1_				
							١	Washi	ington, D.C.	205	49						OMB APPROVAL			
Check	NT C	NT OF CHANGES IN BENEFICIAL OWNERSHIP												OMB Number: 3235-0287 Estimated average burden						
Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b). Filed							d pursuant to Section 16(a) of the Securities Exchange Act of 1934												0.5	
					_		()		Investment			t of 194	0							
1. Name and Address of Reporting Person [*] KANIA EDWIN M JR						2. Issuer Name and Ticker or Trading Symbol <u>TransMedics Group, Inc.</u> [TMDX]										icable)	Reporting Person(s) to Issuer le) 10% Owner			
						3. Date of Earliest Transaction (Month/Day/Year)									X Director 10% Owner Officer (give title Other (speci					
(Last) (First) (Middle)					05/23/2023 below)													below)	speeny	
C/O TRANSMEDICS GROUP, INC.					4. lf.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
200 MINUTEMAN ROAD															ine)					
(Street)															X Form filed by One Reporting Person Form filed by More than One Reporting					
ANDOVER MA 01810					Person															
						Rule 10b5-1(c) Transaction Indication														
(City) (State) (Zip)						Cher	k this ho	x to in	dicate that a t	rans	action was	made ni	irsuan	t to a co	ntract instruc	tion or writte	en nlan	that is intend	led to	
						satisf	fy the affi	rmativ	e defense co	nditic	ons of Rule	10b5-1(c). See	Instruct	ion 10.		in pian	that is intend		
		Tabl	e I - No	n-Deriv	ative	Sec	curitie	s Ac	quired, I	Dis	posed	of, or	Ben	eficia	lly Owne	d				
1. Title of	Security (Ins	tr. 3)		2. Transa	action		A. Deem		3.		4. Secu				5. Amo				7. Nature	
Date					h/Day/Year) i		Execution Date, if any (Month/Day/Year		Code (Instr				Benefi Owned		ially Following	(D) o	or Indirect	of Indirect Beneficial Ownership		
									Code	v	Amount		A) or D)	Price	Reporte Transac (Instr. 3	ction(s)		!	(Instr. 4)	
Common Stock 05/25/					/2023	2023		A		1,193	3(1)	A	\$0.0	0 25	257,944		D			
						Τ													By	
Common Stock														46	6,142		I F	Kania		
																		2021 GRAT B		
																			GIAI D	
		Та							uired, Di s, option:						/ Owned					
1. Title of	2.	3. Transaction	3A. Deen		4.		5. Nun		6. Date Exe			7. Title			8. Price of	9. Numbe	r of	10.	11. Nature	
Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)		Transactior Code (Instr. 8)		n of 🛛		Expiration Date (Month/Day/Year)			Amount of Securities Underlying Derivative Sec (Instr. 3 and 4)			Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly Form: Direct (D or Indirec (I) (Instr.	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficia Ownershi (Instr. 4)	
										Τ			A	mount						
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	N 0	umber						
Stock Option (Right to Buy)	\$71.33	05/25/2023			A		1,916		(2)	t	5/23/2033	Comm	on 1	L,916	\$0.00	1,916	,	D		

Explanation of Responses:

1. Includes 1,193 restricted stock units ("RSUs"). Each RSU represents a contingent right to receive one share of the Issuer's common stock.

2. The option vests in full on the earlier of May 25, 2024 or the date of the 2024 annual meeting of the stockholders of the Issuer, subject to continued service.

<u>By: /s/ Stephen Gordon,</u> <u>Attorney-in-Fact</u>

** Signature of Reporting Person Date

05/30/2023

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

 \ast 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.