FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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Check this box if no longer subject to	STA
Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
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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* <u>Gordon Stephen</u>					2. Issuer Name and Ticker or Trading Symbol TransMedics Group, Inc. [ TMDX ]								heck all appli Direct	tor		10% O	wner	
(Last) (First) (Middle) C/O TRANSMEDICS GROUP, INC. 200 MINUTEMAN ROAD						3. Date of Earliest Transaction (Month/Day/Year) 11/07/2022								^ below	Officer (give title below)  Chief Financial Officer			pecify
(Street) ANDOVER MA 01810  (City) (State) (Zip)					4. li	f Ame	endmei	nt, Date	of Origina	al File	ed (Month/D	ay/Year)	6. l	X Form	filed by One	e Rep	g (Check Ap orting Person n One Repo	on
				n-Deriv	vative	e Se	curit	ies Ac	auired	. Die	snosed (	of, or Be	neficia	Ilv Owne				
Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					ction	tion 2A. Deemed Execution Date,		3. Transa Code (	3. 4. Securitie Transaction Disposed ( Code (Instr.		ties Acquired (A) or Of (D) (Instr. 3, 4 and		5. Amor Securit Benefic Owned	unt of es ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	Code V Amoun		(A) or Pric		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)
Common	Stock			11/07	/2022	022		M <sup>(1)</sup>		728	A	\$2.2	1 6	,442		D		
Common	Stock			11/07	/2022	022		M <sup>(1)</sup>		9,272	A	\$16.1	14 15	,714		D		
Common Stock 11/07/2					/2022				S <sup>(1)</sup>		10,000	) D	\$56.72	2 <sup>(2)</sup> 5	714		D	
		Т	able II								osed of converti			y Owned				
Derivative Conversion Dat		3. Transaction Date (Month/Day/Year)	Execution Date		Date, Transac Code (In		of Deri Sec Acq (A) of Disp of (I	ivative urities uired or oosed D) tr. 3, 4	6. Date Exercis Expiration Date (Month/Day/Yea		te	7. Title an Amount o Securities Underlyin Derivative (Instr. 3 an	f g Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ily	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$2.21	11/07/2022			M <sup>(1)</sup>			728	(3)		06/22/2027	Common Stock	728	\$0.00	0		D	
Stock Option (Right to	\$16.14	11/07/2022			M <sup>(1)</sup>			9,272	(4)		02/27/2030	Common Stock	9,272	\$0.00	40,728	3	D	

## **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 \$56.66 to \$57.48, 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 option is fully vested.
- 4. 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 27, 2024.

## Remarks:

By: /s/ Stephen Gordon

11/09/2022

\*\* Signature of Reporting Person D

Date

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

- $^{\star}$  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.