WRIGHT MEDICAL GROUP INC

Form 4

September 20, 2007

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

30(h) of the Investment Company Act of 1940

OMB Number:

3235-0287

Expires:

January 31, 2005

0.5

Estimated average

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OMB APPROVAL

response...

if no longer subject to Section 16. Form 4 or Form 5

Check this box

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section

See Instruction 1(b).

obligations

may continue.

(Print or Type Responses)

1. Name and Address of Reporting Person * BAYS F BARRY			2. Issuer Name and Ticker or Trading Symbol WRIGHT MEDICAL GROUP INC [WMGI]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)		
(Last) 5677 AIRLIN	(First) TE ROAD	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 09/18/2007	X Director 10% OwnerX Officer (give title Other (specify below) below) Exec. Chairman of the Board		
(Street)			4. If Amendment, Date Original Filed(Month/Day/Year)	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person		
ARLINGTON, TN 38002				Form filed by More than One Reporting Person		

(City)	(State)	(Zip) Tab	le I - Non-	Derivative	e Secu	rities Acqui	red, Disposed of,	or Beneficial	y Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transactic Code (Instr. 8)	omr Dispo (Instr. 3,	sed of 4 and (A) or	` ′	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
Common Stock	09/18/2007		M	2,025	A	\$ 16.59	22,025	D	
Common Stock	09/18/2007		S <u>(1)</u>	2,025	D	\$ 27.3858 (2)	20,000	D	
Common Stock	09/19/2007		M	2,025	A	\$ 16.59	22,025	D	
Common Stock	09/19/2007		S <u>(1)</u>	2,025	D	\$ 27.5388 (3)	20,000	D	

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

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SEC 1474 (9-02)

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	rative Expiration Date es (Month/Day/Year) d		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Employee Stock Option (right to buy)	\$ 16.59	09/18/2007		M	2,025	<u>(4)</u>	03/25/2013	Common Stock	2,025
Employee Stock Option (right to buy)	\$ 16.59	09/19/2007		M	2,025	<u>(4)</u>	03/25/2013	Common Stock	2,025

Reporting Owners

Reporting Owner Name / Address	Relationships						
1 8	Director	10% Owner	Officer	Other			
BAYS F BARRY 5677 AIRLINE ROAD ARLINGTON, TN 38002	X		Exec. Chairman of the Board				

Signatures

/s/ J. Daniel Huffines, per Power of Attorney for F. Barry
Bays 09/20/2007

**Signature of Reporting Person

Reporting Owners 2

Date

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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) The sales occurred pursuant to a 10b5-1 trading plan.
- (2) The reported price is the weighted-average sale price per share for 18 transactions in which the sale prices ranged from \$27.02 to \$27.86 per share.
- (3) The reported price is the weighted-average sale price per share for 19 transactions in which the sale prices ranged from \$27.12 to \$28.24 per share.
- (4) The stock option vested and became exercisable in four equal annual installments beginning on 03/25/2004.

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.