#### WRIGHT MEDICAL GROUP INC

Form 4 June 29, 2007

#### FORM 4

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

OMB Number: 3235-0287

Estimated average

Check this box if no longer subject to Section 16.

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Expires: January 31, 2005

**OMB APPROVAL** 

Form 4 or Form 5 obligations may continue.

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 30(h) of the Investment Company Act of 1940

burden hours per response... 0.5

See Instruction 1(b).

(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 AIRL	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 06/28/2007					X Director 10% OwnerX Officer (give title Other (specify below) Exec. Chairman of the Board		
				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 Form filed by More than One Reporting Person		
(City)	(State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)  2. A. Deemed Execution Date, if any (Month/Day/Year)			3. 4. Securities Acquired Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8)  (A) or Code V Amount (D) Price				5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	
Common Stock	06/28/2007			M	2,025	A	\$ 18.94	22,025	D	
Common Stock	06/28/2007			S <u>(1)</u>	2,025	D	\$ 24.75 (2)	20,000	D	

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

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 control number.

SEC 1474

(9-02)

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# 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)	Transaction Derivative Code Securities		6. Date Exercisable and Expiration Date (Month/Day/Year)		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)	\$ 18.94	06/28/2007		M	2,025	(3)	03/28/2012	Common Stock	2,025	

## **Reporting Owners**

Reporting Owner Name / Address			<b>110.00.</b> 0.10.11. <b>p</b> 0	
	D' (	1007	O.C.	0

Director 10% Owner Officer Other

Relationshins

BAYS F BARRY

5677 AIRLINE ROAD X Exec. Chairman of the Board

ARLINGTON, TN 38002

### **Signatures**

/s/ Beverly Sanders Gates, per Power of Attorney for F. Barry
Bays 06/29/2007

\*\*Signature of Reporting Person Date

### **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 pirce is the weighted-average sale price per share for 17 transactions in which the sale prices ranged from \$24.52 to \$24.91 per share.
- (3) The stock option vested and became exercisable in four equal annual installments beginning on 03/28/2003.

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.

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