

WRIGHT MEDICAL GROUP INC  
 Form 4  
 December 14, 2011

**FORM 4** UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549

OMB APPROVAL  
 OMB Number: 3235-0287  
 Expires: January 31, 2015  
 Estimated average burden hours per response... 0.5

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

**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF 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 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person \*  
 OEPW, LLC

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) (First) (Middle)  
 320 PARK AVENUE, 18TH FLOOR  
 (Street)

3. Date of Earliest Transaction (Month/Day/Year)  
 12/12/2011

\_\_\_\_ Director  
 \_\_\_\_ Officer (give title below)  
 10% Owner  
 \_\_\_\_ Other (specify below)

NEW YORK, NY 10022

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Filing(Check Applicable Line)  
 \_\_\_\_ 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)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	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 Ownership (Instr. 4)	
				Code	V	Amount	(D)	Price
Common Stock	12/12/2011		P		75,000	A		\$ 15.07 (1)
Common Stock	12/13/2011		P		125,000	A		\$ 14.99 (2)
Common Stock	12/14/2011		P		125,000	A		\$ 14.53 (3)

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)

**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. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of Derivative Securities Beneficially Owned Following Reported Transaction (Instr. 3)
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
OEPW, LLC 320 PARK AVENUE 18TH FLOOR NEW YORK, NY 10022		X		
One Equity Partners IV, L.P. 320 PARK AVENUE 18TH FLOOR NEW YORK, NY 10022		X		
OEP General Partner IV, L.P. 320 PARK AVENUE 18TH FLOOR NEW YORK, NY 10022		X		
OEP Parent LLC 320 PARK AVENUE 18TH FLOOR NEW YORK, NY 10022		X		

## Signatures

OEPW, LLC, By: One Equity Partners IV, L.P., its Managing Member, By: OEP General Partner IV, L.P., its General Partner, By: OEP Parent LLC, its General Partner, /s/ Christian Ahrens, Name: Christian Ahrens, Title: Managing Director

12/14/2011

Edgar Filing: WRIGHT MEDICAL GROUP INC - Form 4

<u>Signature of Reporting Person</u>	Date
One Equity Partners IV, L.P., By: OEP General Partner IV, L.P., its General Partner, By: OEP Parent LLC, its General Partner, /s/ Christian Ahrens, Name: Christian Ahrens, Title: Managing Director	12/14/2011
<u>Signature of Reporting Person</u>	Date
OEP General Partner IV, L.P., By: OEP Parent LLC, its General Partner, /s/ Christian Ahrens, Name: Christian Ahrens, Title: Managing Director	12/14/2011
<u>Signature of Reporting Person</u>	Date
OEP Parent LLC, By: /s/ Christian Ahrens, Name: Christian Ahrens, Title: Managing Director	12/14/2011
<u>Signature of Reporting Person</u>	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 price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$15.05 to \$15.11. The number of shares purchased at each separate price within the ranges set forth in footnotes (1), (2) and (3) to this Form 4 will be made available to the staff of the Securities and Exchange Commission, the issuer or any security holder of the issuer upon request.
  - (2) The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$14.89 to \$15.25.
  - (3) The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions at prices ranging from \$14.45 to \$14.76.
- (4) The securities are directly held by OEPW, LLC, a Delaware limited liability company ("OEPW"). The sole member of OEPW is One Equity Partners IV, L.P., a Cayman Islands limited partnership ("OEP IV"), of which the sole general partner is OEP General Partner IV, L.P., a Cayman Islands limited partnership ("OEP GP IV"), of which the sole general partner is OEP Parent LLC, a Delaware limited liability company ("OEP Parent"). The Reporting Persons are OEPW, OEP IV, OEP GP IV and OEP Parent.

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.