

WRIGHT MEDICAL GROUP INC
 Form 3
 November 03, 2004

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL
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INITIAL STATEMENT OF 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 *		2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Joines Kyle M		(Month/Day/Year)	WRIGHT MEDICAL GROUP INC [WMGI]	
(Last)	(First)	(Middle)	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
		11/01/2004		
5677 AIRLINE ROAD			(Check all applicable)	6. Individual or Joint/Group Filing(Check Applicable Line)
	(Street)		<input type="checkbox"/> Director <input type="checkbox"/> 10% Owner	<input checked="" type="checkbox"/> Form filed by One Reporting Person
ARLINGTON, TN 38002			<input checked="" type="checkbox"/> Officer <input type="checkbox"/> Other	<input type="checkbox"/> Form filed by More than One Reporting Person
(City)	(State)	(Zip)	Vice President - Manufacturing	

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
Common Stock	147	D	^

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly. SEC 1473 (7-02)

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Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of	

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				Shares		(I) (Instr. 5)	
Employee Stock Option (right to buy)	Â (1)	03/28/2011	Common Stock	9,363	\$ 8.25	D	Â
Employee Stock Option (right to buy)	Â (2)	03/28/2012	Common Stock	5,000	\$ 18.94	D	Â
Employee Stock Option (right to buy)	Â (3)	03/25/2013	Common Stock	5,000	\$ 16.59	D	Â
Employee Stock Option (right to buy)	Â (4)	10/23/2013	Common Stock	15,450	\$ 27.3	D	Â
Employee Stock Option (right to buy)	Â (5)	03/25/2014	Common Stock	10,000	\$ 30.11	D	Â

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Joines Kyle M 5677 AIRLINE ROAD ARLINGTON, TN 38002	Â	Â	Â Vice President - Manufacturing	Â

Signatures

/s/ Peter H. Kesser, per Power of Attorney for Kyle M.
Joines

11/03/2004

__Signature of Reporting Person

Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 5(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) This stock option is currently exercisable with respect to 6,181 shares and will be exercisable with respect to the remaining 3,182 shares on 03/28/2005.
- (2) This stock option is currently exercisable with respect to 2,500 shares and will be exercisable with respect to 1,250 shares on 03/28/2005 and 1,250 shares on 03/28/2006.
- (3) This stock option is currently exercisable with respect to 1,250 shares and will be exercisable with respect to 1,250 shares on 03/25/2005, 1,250 shares on 03/25/2006 and 1,250 shares on 03/25/2007.
- (4) This stock option is currently exercisable with respect to 3,862 shares and will be exercisable with respect to 3,863 shares on 10/23/2005, 3,862 shares on 10/23/2006 and 3,863 shares on 10/23/2007.
- (5) This stock option will be exercisable with respect to 2,500 shares on 03/25/2005, 2,500 shares on 03/25/2006, 2,500 shares on 03/25/2007 and 2,500 shares on 03/25/2008.

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.