FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL									
OMB Number:	3235-0287								
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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Capps Scott B					CR'	2. Issuer Name and Ticker or Trading Symbol  CRYOLIFE INC [ CRY ]									elationship ck all appli Directo	,	g Pei	rson(s) to Is		
(Last)	(Fi	rst) (	Middle)			3. Date of Earliest Transaction (Month/Day/Year) 02/23/2009									below	Officer (give title below)		Other (s	specify	
CRYOLIFE, INC.															VP-Clinical Research					
1655 ROBERTS BLVD., NW					4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)														) )	Form f	iled by One	Rep	orting Perso	on	
KENNES	SAW G	A 3	80144													Form filed by More than One Reporting Person				
(City)	(S	tate) (	Zip)																	
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)						Execution Date,			Transaction Dispose Code (Instr. and 5)			ities Acq d Of (D) (			5. Amo Securiti Benefic Owned Followi	ies For cially (D)		n: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	mount (A) or (D)		Price	Reporte			1. 4)	(IIISU. 4)	
			Table						uired, Dis , options,		,			•	vned					
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. Transactior Code (Instr 8)		on of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owner Form: Direct or Ind (I) (Ins 4)	Ownership Form: Direct (D) or Indirect (I) (Instr.	Beneficial Ownership ect (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	or Nu of	mber ares						
Stock Option	\$4.83	02/23/2009			A		15,000		02/23/2010(	1) 0	2/23/2016	Commor Stock	15	,000	\$0	15,000		D		

## Explanation of Responses:

1. Stock option vests 33 1/3% per year beginning on first anniversary of grant date.

## Remarks:

/s/ Scott B. Capps

\*\* Signature of Reporting Person

02/24/2009

Date

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

\* 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.