FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0104 Estimated average burden hours per response: 0.5

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

e and Address of Reporting Person*

2. Date of Event Requiring Statement Company Act of 1934

2. Date of Event Requiring Statement Company Act of 1940

3. Issuer Name and Ticker or Trading Symbol Company Act of 1940

1. Name and Address of Reporting Person* Barthold Franz Peter		2. Date of E Requiring S (Month/Day	Statement //Year)	3. Issuer Name and Ticker or Trading Symbol CRYOLIFE INC [CRY]						
(Last) (First) CRYOLIFE, INC.	(Middle)	07/01/2020		4. Relationship of Reporting Issuer (Check all applicable) Director	10% Owner)wner	5. If Amendment, Date of Original Filed (Month/Day/Year) 07/01/2020			
(Street) KENNESAW GA (City) (State)	30144 (Zip)			X Officer (give title below) VP, Research & D	Other (specify below) evelopment		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
	Table I - Non-Derivative Securities Beneficially Owned									
1. Title of Security (Instr. 4)			1		1	irect Ownership (Instr. 5) direct				
1. Title of Security (Instr. 4)			[2. Amount of Securities Beneficially Owned (Instr. 1)	3. Owner Form: I (D) or II (I) (Inst	Direct ndirect				
1. Title of Security (Instr. 4) Common Stock			[Beneficially Owned (Instr.	Form: [(D) or li	Direct ndirect r. 5)				
) Perivative	Beneficially Owned (Instr. 4)	Form: I (D) or li (I) (Inst	Direct ndirect r. 5)	Own			
,	(e.g.		Derivative ls, warrar	O(1) Securities Beneficia	Form: I (D) or II (I) (Insti	Direct ndirect r. 5)	Sion			

Explanation of Responses:

1. This Form 3/A is being filed solely to include a Power of Attorney, included herewith as Exhibit 1, that was inadvertently omitted from the original filing.

Franz Peter Barthold 05/19/2021

** Signature of Reporting Person

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 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).

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.