## FORM 4

Check this box if no longer subject

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL

| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| Estimated average burden |           |  |  |  |  |  |  |  |
| hours per response       | : 0.5     |  |  |  |  |  |  |  |

|  |                  | Table I - Non-De      | rivative Securities Acquired. Disposed of, or Ben  | eficially Owned                                       |                              |                              |                        |
|--|------------------|-----------------------|--|---|------------------------------|------------------------------|------------------------|
| (City)                                 | (State)          | (Zip)                 |  | Person  |                              |                              | er<br>ecify<br>licable |
| KENNESAW GA 30144                      |                  | 30144                 |  |   | d by More than One Reporting |                              |                        |
| (Street)                               |                  | 201.11                |  | Line)<br>X Form filed                                 | d by One Repo                | rting Person                 |                        |
| 1655 ROBERT                            | 5 BLVD, NV       | v                     | 4. If Amendment, Date of Original Filed (Month/Day/Year)   | 6. Individual or Joi                                  | nt/Group Filing              | (Check Applica               | able                   |
| CRYOLIFE, IN                           |                  | 7                     |  |   |                              |                              |                        |
| (Last)                                 | (First)          | (Middle)              | 3. Date of Earliest Transaction (Month/Day/Year)<br>03/05/2021   | í í   | ef Accountin                 | ,                            |                        |
|  |                  |                       | —  | X Officer (g  | ive title                    | Other (specif<br>below)      | y                      |
| 1. Name and Addre<br><u>Horton Amy</u> |                  | g Person <sup>*</sup> | 2. Issuer Name <b>and</b> Ticker or Trading Symbol<br><u>CRYOLIFE INC</u> [ CRY ]  | 5. Relationship of<br>(Check all applicat<br>Director |                              | on(s) to Issuer<br>10% Owner |                        |
| obligations may<br>Instruction 1(b).   | continue. See    |                       | Filed pursuant to Section 16(a) of the Securities Exchange Act of 19<br>or Section 30(h) of the Investment Company Act of 1940 | 34  | hours per resp               | 0                            | 0.5                    |
|  | Form 4 or Form 5 |                       |  |   | Estimated ave                | rade hurden                  |                        |

| Table I - NO                    | II-Derivative S                            | ecunities Acq   | uneu,                        | DIS | poseu oi,                          | U DEI         | lencially | Owneu                              |   |   |
|---------------------------------|--|---|------------------------------|-----|------------------------------------|---------------|-----------|------------------------------------|---|---|
| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transa<br>Code (<br>8) |     | 4. Securities<br>Disposed Of<br>5) |               |           |                                    | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) | 7. Nature<br>of Indirect<br>Beneficial<br>Ownership |
|                                 |  |   | Code                         | v   | Amount                             | (A) or<br>(D) | Price     | Transaction(s)<br>(Instr. 3 and 4) |   | (Instr. 4)  |
| Common Stock                    | 03/05/2021                                 | 03/05/2021  | F                            |     | 226(1)                             | D             | \$24.44   | 91,021                             | D   |   |

|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities) |  |   |                              |   |                 |     |  |                    |       |  |   |  |   |  |
|---|--|--|---|------------------------------|---|-----------------|-----|--|--------------------|-------|--|---|--|---|--|
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3) | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security  | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 4.<br>Transa<br>Code (<br>8) |   | 5. Number<br>of |     | 6. Date Exercisable and<br>Expiration Date<br>(Month/Day/Year) |                    |       |  | 8. Price of<br>Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) | Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|   |  |  |   | Code                         | v | (A)             | (D) | Date<br>Exercisable  | Expiration<br>Date | Title | Amount<br>or<br>Number<br>of<br>Shares |   |  |   |  |

Explanation of Responses:

1. These shares were withheld upon the vesting of performance stock units to pay tax withholding obligations.

## /s/ Amy Horton

03/10/2021

\*\* Signature of Reporting Person Date

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

 $\ast$  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.