# FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number 3235-0287 Estimated average burden

0.5

By

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hours per response:

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

1. Name and Address of Reporting Person <sup>*</sup> HEACOX ALBERT E				2. Issuer Name and Ticker or Trading Symbol <u>CRYOLIFE INC</u> [ CRY ]							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner				
(Last) CRYOLIFE, INC	(First)	(Middle)			ate of Earliest Trans	saction (M	lonth	/Day/Year)	x	Director Officer (give title below) Sr. VP Resea	Other	Other (specify below)			
1655 ROBERTS BOULEVARD, N.W.					Amendment, Date o	of Origina	l File	d (Month/Day/	6. Indi Line)	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)										X	Form filed by On	e Reporting Per	son		
KENNESAW	GA	30144									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) Date (Month/Day				2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of and 5)			5. Amount of Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I)	7. Nature of Indirect Beneficial Ownership			
						Code	v	Amount	(A) or (D)	Price	Following Reported Transaction(s) (Instr. 3 and 4)	(Instr. 4)	(Instr. 4)		
Common Stock			09/18/20	008		М		18,817	A	\$5.795	44,904	D			
Common Stock			09/18/20	008		М		469	A	\$8.7	45,373	D			

### Common Stock 5,346 Trust<sup>(1)</sup> Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 1. Title of 3. Transaction 3A. Deemed 5. Number 6. Date Exercisable and 7. Title and 8. Price 9. Number of 11. Nature 10. Ownership Derivative Conversion Date Execution Date Transaction of Expiration Date Amount of o f derivative of Indirect (Month/Dav/Year (Month/Day/Year) Derivative Security or Exercise if any Code (Instr. Securities Derivative Securities Form: Beneficial (Instr. 3) (Month/Day/Year) 8) Direct (D) Price of Securities Underlying Security Beneficially Ownership Derivative Acquired Derivative (Instr. 5) Owned or Indirect (Instr. 4) Security (Instr. 3 Followina (I) (Instr. Security (A) or Disposed and 4) Reported 4) of (D) Transaction(s) (Instr. 3, 4 (Instr. 4)

1	1					and of		1		//					
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
Stock Option	\$5.795	09/18/2008		М			18,817	08/07/2007 <sup>(2)</sup>	02/07/2012	Common Stock	18,817	\$ <mark>0</mark>	31,183	D	
Stock Option	\$8.7	09/18/2008		М			469	02/23/2008 <sup>(3)</sup>	02/23/2014	Common Stock	469	\$ <mark>0</mark>	22,031	D	

and 5)

### Explanation of Responses:

1. The 5,346 shares are owned by Albert E. Heacox, Trustee, Albert E. Heacox Living Trust under an agreement dated 10-29-99.

2. Stock option vests in 20% increments beginning on first anniversary of grant date (Aug. 7, 2006).

3. Stock option vests 33 1/3% per year beginning on first anniversary of grant date (Feb. 23, 2007).

### Remarks:

### /s/ Albert E. Heacox

\*\* Signature of Reporting Person

09/19/2008 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.