FORM 4

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

Washington, D.C. 20549

## STATEMENT OF

CHANGES IN BENEFICIAL OWNERSHIP	

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b) Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

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

OMB ADDDOMAI

1. Name and Address of Reporting Person*						2. Issuer Name and Ticker or Trading Symbol  CRYOLIFE INC [ CRY ]										eck all a Di	pplic ecto	r		son(s) to Issuer  10% Owner Other (specify		
(Last) 1655 RO	(F BERTS BI		3. Date of Earliest Transaction (Month/Day/Year) 07/26/2018														below)	specify				
(Street) KENNESAW GA 30144						4. If Amendment, Date of Original Filed (Month/Day/Year)										e) <mark>X</mark> Fo						
(City)	(5		(Zip) ole I - Nor	n-Deriv	/ativ	e Se	curit	ies A	cqu	ıired, [	Disp	osed o	of, o	r Ben	 eficia	ly Ow	ned	<u> </u>				
1. Title of Security (Instr. 3)				Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date if any (Month/Day/Yea		Code (Ir							) or 4 and Securitie Benefici Owned F		es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount		(A) or (D)	Price			tion(s)			(Instr. 4)	
Common Stock (					26/2018		07/26/2018(1		(1)	М		3,391	1	. A \$		3	56,134(2)		D			
Common Stock				07/2	7/26/2018		07/26/2018		8	S		3,391	. D \$		\$31	3)	52,743		D			
		-	Table II -									sed of, onvertil				Own	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	l. Fransaction Code (Instr. B)		of Deri Sec Acq (A) o Disp of (I	oosed D) tr. 3, 4	Exp	Date Exer piration D pnth/Day/	ate		7. Title and Amount of Securities Underlying Derivative Seci (Instr. 3 and 4)			Deriva Securi	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	e s Illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		Expiration Date	Title		Amount or Number of Shares							
Stock Option (Right to	\$16.3	07/26/2018	07/26/20	018	M			3,391	02/2	21/2018 <sup>(4</sup>	0	2/21/2024		nmon ock	3,391	\$16.	3	0		D		

## **Explanation of Responses:**

- 1. The sale reported on this form was effected pursuant to a 10b5-1 trading plan adopted by the reporting person on December 8, 2017.
- 2. In a Form 4 filed on July 10, 2018, Reporting Person over reported the total number of shares beneficially owned by a de minimus number of shares. As a result, such shares were reflected in the posttransaction amounts in column 5 of that Form 4. Beneficially owned shares are hereby updated in column 5 on this Form 4 to remove such previously-added shares.
- 3. Reflects the price of \$31 the shares were sold. The reporting person will provide upon request by the Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased or sold at this price
- 4. Stock option vests 33 1/3% per year beginning on the first anniversary of the grant date. The first exercisable date was 2/21/2018

/s/ John Davis 07/30/2018

\*\* Signature of Reporting Person

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.