## SEC Form 4

## 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							

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	L	Estimated average burden hours per response:	0.5		
1. Name and Address of Reporting Person <sup>*</sup> Borgstrom Marna P	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CRYOLIFE INC</u> [ CRY ]	(Check all applicab X Director	10% Owne	er		
(Last) (First) (Middle) CRYOLIFE, INC.	3. Date of Earliest Transaction (Month/Day/Year) 06/01/2020	Officer (giv below)	ve title Other (spec below)	cify		
1655 ROBERTS BLVD, NW	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicable Line)				
(Street) KENNESAW GA 30144		X Form filed	l by One Reporting Person I by More than One Reportin	ng		
(City) (State) (Zip)						

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)			4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(
Common Stock	06/01/2020	06/01/2020	Α		5,667 <sup>(1)</sup>	Α	\$22.94	14,464	D	

	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned   (e.g., puts, calls, warrants, options, convertible securities)													
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. Transaction Code (Instr 8)	of Deriv	r osed ) r. 3, 4	6. Date Exercisa Expiration Date (Month/Day/Yea		7. Titl Amou Secur Unde Deriv Secur 3 and	int of ities rlying ative ity (Instr.	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
										Amount or				

Date Exercisable

Expiration Date

Explanation of Responses:

1. Represents shares of restricted stock that cliff vest on June 1, 2021, provided the status as a Director with CryoLife continues through such date.

Code v

## /s/ Marna Brogstrom

Title

Number

of Shares

\*\* Signature of Reporting Person Date

0<u>6/02/2020</u>

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.

(D)

(A)