FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL OMB Number: 3235-0287 Estimated average burden

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By

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1,500

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 [*] LEE DAVID ASHLEY | | | | | uer Name and Tick | | | Symbol | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|--|---------|-------|---------|--|--------------------------|---|---|--|---|--|---|--|---|--|--|
| (Last) (First) (Middle) | | | | 3. Date of Earliest Transaction (Month/Day/Year) 07/07/2011 | | | | | | | Director Officer (give title below) | below | (specify) | | |
| CRYOLIFE, INC. | | | | | | | | | | | Exec. VP, COO and CFO | | | | |
| 1655 ROBERTS BLVD., N.W. | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Indi Line) | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | |
| (Street) | | | | | | | | | | | X Form filed by One Reporting Person | | | | |
| 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 | | | | Execution Date, | | 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 | | |
| | | | | | | | v | Amount (A) or (D) | | Price | Following Reported Transaction(s) (Instr. 3 and 4) | (Instr. 4) | (Instr. 4) | | |
| Common Stock | | | 07/07/2 | 011 | | М | | 17,200 | A | \$4.25 | 178,576 | D | | | |
| Common Stock 07/07/ | | | 07/07/2 | 011 | | F | | 13,790 | D | \$5.91 | 164,786 | D | | | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) 3 Transaction 3A Deemed 4 5 Number 6 Date Exercisable and 7 Title and 8 Price 8 Price 9 Number of

| 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 | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | Owned | Ownership Form: | Beneficial Ownership |
|---|---|--|---|---|---|-----|--------|--|--------------------|---|--|--|-------|--------------------|-------------------------|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |
| Stock Option | \$4.25 | 07/07/2011 | | М | | | 17,200 | 02/21/2007 ⁽¹⁾ | 08/21/2011 | Common Stock | 17,200 | \$0 | 0 | D | |

Explanation of Responses:

Common Stock

1. Stock option vested in 20% increments beginning on the first anniversary of the February 21, 2006 grant date.

Remarks:

| /s/ D.A. Lee | |
|---------------------------|--------|
| ** Signature of Penerting | Doroor |

Signature of Reporting Person Date

07/08/2011

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.