FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

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| STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP |
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OMB APPROVAL

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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 (Last) (First) (Middle) CRYOLIFE, INC. 1655 ROBERTS BLVD, NW | | | | | | 2. Issuer Name and Ticker or Trading Symbol CRYOLIFE INC [CRY] | | | | | | | | | | all app | olicable) | g Person(s) to Issuer 10% Owner Other (specify below) , COO & CFO | | Owner | |
|--|--|--|--|---------|---|---|--|---|------------------|--|--------------------|--|------------------------------------|-------|-------------|---|--|--|--|---|--|
| | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 02/22/2019 | | | | | | | | | | X | belov | v) `` | | | | |
| (Street) KENNESAW GA 30144 (City) (State) (Zip) | | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | . Indivine) | | | | | | |
| | | Tabl | e I - No | n-Deriv | ative | Se | curitie | s Acc | quired, | , Dis | posed o | f, o | r Ben | efici | ally | Owne | ed | | | | |
| Date | | | | Date | te Executionth/Day/Year) if any | | Execution if any | A. Deemed kecution Date, any lonth/Day/Year) | | Transaction D | | 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5) | | | | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | Code | | | v | Amount | | (A) or (D) | Price | • | Transaction(s) (Instr. 3 and 4) | | | | (11341.4) | | | | |
| Common Stock 02/22 | | | | | 2/2019 | | 02/22/2019 | | F | | 1,103 | 1) |) D \$2 | | .38 | 38 274,576 | | 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. Deem Execution if any (Month/Da | n Date, | 4. Transa Code (8) | | n of Deriv Secu Acqu (A) or Dispo of (D) (Instr | of | | 6. Date Exercis Expiration Date (Month/Day/Yea | | 7. Title and Amount of Securities Underlying Derivative Security (Instr and 4) | | | | | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | \ \ | (A) | (D) | Date Exercisa | | Expiration Date | Title | Numbe of Title Shares | | | | | | | | |

Explanation of Responses:

1. Represent shares of restricted stock that were withheld for taxes on the grant vest date.

<u>/s/ D. Ashley Lee</u> <u>02/25/2019</u>

** Signature of Reporting Person 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.