UNITED STATES SECURITIES AND EXCHANGE COMMISSION
WASHINGTON, D.C. 20549
FORM 5
ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP
() Check box if no longer subject to Section 16.
Form 4 or Form 5 obligations may continue. See Instructions 1(b).
() Form 3 Holdings Reported
(X) Form 4 Transactions Reported
1. Name and Address of Reporting Person
LACY, VIRGINIA C.
c/o CryoLife, Inc.
1655 Roberts Boulevard, NW
Kennessaw, GA 30144

Issuer Name and Ticker or Trading Symbol CRYOLIFE, INC.

CRY

- 3. IRS or Social Security Number of Reporting Person (Voluntary)
- 4. Statement for Month/Year 12/1999
- 5. If Amendment, Date of Original (Month/Year)
- 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) (X) Director () 10% Owner () Officer (give title below) () Other (specify below)
- 7. Individual or Joint/Group Reporting (Check Applicable Line)
  - (X) Form filed by One Reporting Person
  - ( ) Form filed by More than One Reporting Person

. Title of Security		i	(D)	/1	5.Amount of   Securities   Beneficially   Owned at   End of Year		İ
ommon Stock, \$.01 par value	5-11-9 S4		D	\$11.25 	 	 	 
ommon Stock, \$.01 par value	19 1)	i i	i	i			
ommon Stock, \$.01 par value		(1 2,500	D				
ommon Stock, \$.01 par value	5-12-9 S4  9  )		I D	11.125		   	
ommon Stock, \$.01 par value	5-12-9 S4  9  )		I D	11.00			
ommon Stock, \$.01 par value	5-13-9 S4  9  )		I D	1	1	1	Pension Plan (1)
	I I	 		1	24,000	D	ı
	I I		1		110,586	ΙI	
	I I	 	1		215,500		

1.Title of Derivative	2.Con	13.	4.	5.Number	of De	6.Date Exe	r 7.Tit	le and A	Amount	8.Price	9.Number	10. 11.Nature
Security	version	Trans	saction	n rivativ	re Secu	cisable ar	d  of 1	Underly	ing	of Deri	of Deriva	Dir Indirect
	or Exer	Date	Code	rities	Acqui	Expiration	Sec	urities		vative	tive	ect Beneficia
	cise Pr	1	1	red(A)	or Dis	Date (Month	/			Secu	Securities	(D) Ownership
	ice of	1	1	posed o	of (D)	Day/Year)	1			rity	Benefi	or
	Deriva	1	1	I		Date  Expi	r			1	ficially	Ind
	tive	1	1	I	A	/ Exer- atio	n  Ti	tle and	Number	1	Owned at	ire
	Secu	1	1	I	D	cisa- Date	of	Shares			End of	ct
	rity	1	1	Amount	- 1	ble	1			1	Year	(I)

Explanation of Responses:

- (1) Shares sold by the Precision Devices Qualified Pension Plan (the "Plan") of which Ms. Lacy is an administrator of the Plan.
- (2)  $\,$  Ms. Lacy is the beneficiary of a trust and two IRAs in the name of her deceased spouse.

SIGNATURE OF REPORTING PERSON

VIRGINIA C. LACY

DATE