| SEC Fo | rm 4 |
|--------|------|
| | |

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

| OMB Number: | 3235-0287 |
|-----------------------|-----------|
| Estimated average bui | rden |
| hours per response: | 0.5 |

| | Check this box if no longer subject to Section 16. Form 4 or Form 5 |
|--|---|
| | obligations may continue. See Instruction 1(b). |

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is

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

| | sfy the affirmative ons of Rule 10b5- ction 10. | | | | | |
|---------------------------------------|---|----------|--|-------------------|--|---|
| 1. Name and Addre | ess of Reporting Pers | on* | 2. Issuer Name and Ticker or Trading Symbol ARTIVION, INC. [AORT] | | tionship of Reporting Pe all applicable) Director Officer (give title | erson(s) to Issuer 10% Owner Other (specify |
| (Last) ARTIVION, IN 1655 ROBERT | | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) 12/06/2024 | | below) VP, Chief Accoun | below) |
| (Street) KENNESAW | GA | 30144 | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv Line) | idual or Joint/Group Fili Form filed by One Re Form filed by More th Person | porting Person |
| (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) | 3. Transa Code (8) | | 4. Securities Disposed Of 5) | | | Securities Beneficially | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | of Indirect |
|---------------------------------|--|---|------------------------------|---|------------------------------------|---------------|---------|------------------------------------|---|-------------|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (1130.4) |
| Common Stock | 12/06/2024 | | S | | 4,329(1) | D | \$29.66 | 135,660 | D | |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

| | (e.g., puis, cais, warants, 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. Transa Code (8) | | of Deriv Secu Acqu (A) o Dispo of (D (Instr | 5. Number 6. Da of Expi | | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | e and Int of rities rlying ative rity (Instr. 4) | 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) |
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | | | |

Explanation of Responses:

1. These shares were sold upon the vesting of Restricted Stock Units to pay tax withholding obligations. The sale was to satisfy tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary transaction.

Remarks:

/s/ Amy Horton

** Signature of Reporting Person Date

12/09/2024

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.