FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Machinatan	D C	20540	
Nashington,	D.C.	20049	

STATEMENT OF	CHANGES IN	BENEFICIAL	OWNERSHIP

OMB APP	ROVAL						
OMB Number: 3235-0287							
Estimated average burden							
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).

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. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of	3. Transaction Date (Month/Day/Year)	3A. Dee Execution	(e.g., pu		alls, v	varra	mber	option	IS, C Exerci	onvertib		e and int of ities	8. I De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiali	F	10. Ownership Form: Direct (D)	11. Nature of Indirect Beneficial Ownership	
Common Stock			/30/2024 vative Securi		ritios Acqu		A		6,289(1)	A	1	\$0	0 143,736			D		_		
Date		2. Transac Date (Month/Da	Execution E ny/Year) if any		ution Date,		Transaction Disposed Code (Instr. 5)		Disposed ( 5)	(A) or (D) Pri			Report	ies cially Following	Form:	Direct Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
		Table	I - Nor	n-Deriva							posed of					ed				
(City)	(S	tate) (2	Zip)		$ _{\Box}$	Check tl	nis box	to indic	cate that a	a trans	action was m	ade pur	suant to			uction or writt	en plan	that is inter	nded to	
KENNE	SAW G	A 3	0144		Rul	e 10	)b5-	1(c)	Trans	sact	ion Indi	icatio	on .		Perso	on .			_	
1655 RO (Street)	BERTS B	LVD NW			4. 11 /	inena	ineni,	Date of	i Oligilia	ii riied	i (MOHUI)Da	iyi rear,		Line)	Form	filed by On	e Repo	orting Perso	on	
(Last)	•	irst) (f	/liddle)		05/3	0/202	4				d (Month/Da	w/Voor)		6 Indi	below		n Filina	below)		
1. Name and Address of Reporting Person*  BEVEVINO DANIEL J				Issuer Name and Ticker or Trading Symbol ARTIVION, INC. [ AORT ]      Date of Earliest Transaction (Month/Day/Year)							k all app Direc	,	ig Pers	10% Ov	vner					

## **Explanation of Responses:**

1. RSA Grant vests on May 30th 2025, pursuant to the terms of the Equity and Cash Incentive Plan.

## Remarks:

/s/ Daniel J. Bevevino

06/03/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.