FORM 4

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

Washington, D.C. 20549

OMB APPROVAL									
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).

## 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*  Gale David C						2. Issuer Name and Ticker or Trading Symbol CRYOLIFE INC [ CRY ]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner							
(Last)	(Fi	rst) (	Middle)		3. Dat 02/2			Tran	nsaction (Month/Day/Year)						below	Officer (give title below)		Other (			
CRYOLIFE, INC.														VP-Research and Development							
1655 ROBERTS BLVD., N.W.						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)															X Form filed by One Reporting Person						
KENNE	SAW G	<b>A</b> 3	30144												Form f Perso	ın One Rep	orting				
(City)	(S	tate) (	Zip)																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3)  2. Transacti Date (Month/Day)						Execution Date,			3. Transaction Code (Instr. 8) 4. Securi						5. Amor Securiti Benefic Owned	ially	6. Ownership Form: Direct (D) or Indirect (I)		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) (D)	or P	rice	Following Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(111501.4)		
Common Stock 02/26/20						014			A		10,000 <sup>(1)</sup> A		1	\$ <mark>0</mark>	53,668			D			
			Tabl						uired, Di					y Ow	ned						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		n of E		6. Date Exercisable a Expiration Date (Month/Day/Year)		)	e and 7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership		
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amo or Num of Shar	ber							
Stock Option (Right to Buy)	\$9.97	02/26/2014			A		10,000		02/26/2015	2) 0	02/26/2021	Commor Stock	10,0	000	\$0	10,000	,	D			

## Explanation of Responses:

- 1. Represents shares of restricted stock that vest on the third anniversary of the grant date if the reporting person remains in the continuous employ of the Company.
- 2. Stock option vests 33 1/3% per year beginning on first anniversary of grant date.

## Remarks:

<u>/s/ David C. Gale</u> <u>02/26/2014</u>

\*\* 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.