FORM 5

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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Washing	ton,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0362							
Estimated average burden							
hours per response	1.0						

Form 3	3 Holdings Rep	orted.	O 11.12.131111										L	hours per response:			1.0		
Form 4	1 Transactions	Reported.	Filed	d pursuant to S or Section 3															
1. Name and Address of Reporting Person* <u>Davis John E</u>			2. Issuer Name and Ticker or Trading Symbol ARTIVION, INC. [AORT]						5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title Other (specify										
(Last) 1655 RO	(Fi DBERTS BI	,	Middle)	3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2023						Year)	X below) Senior VP, Global Sales								
(Street)	SAW G	A 3	30144								Individual or Joint/Group Filing (Check Appl ne) X Form filed by One Reporting Person Form filed by More than One Reporting				1				
(City)	(St	ate) (Zip)	Person															
		Table	I - Non-Deriva	ative Secur	ities	s Acq	uire	ed, Dis	posec	l of, d	or E	Benefici	ally Ov	/ned					
Dat		Date (Month/Day/Year)	2A. Deemed Execution Date if any (Month/Day/Yea	Date, Trans		Transaction Code (Instr.		4. Securities Acquired (A) or Dispo Of (D) (Instr. 3, 4 and 5)			r Disposed	5. Amoun Securities Beneficia Owned at		S Owne		: Direct Benefic			
			(Month/Day/Tear)		8)		Amount		(A) or (D)	r Price		Issue	r's Fiscal Instr. 3 a	Fiscal Indire		ect (I) (Instr. 4			
Common Stock 06/30			06/30/2023	A			2,000 A		A		\$10.302(1)		130,733		D				
		Та	ble II - Derivat (e.g., pւ	ive Securit uts, calls, v										ed					
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. Transaction Code (Instr. 8)	of Deriv Secu Acqu (A) o Disp of (D (Inst and	osed)) r. 3, 4	Expi (Mor	5. Date Exercisable and Expiration Date Month/Day/Year) Date Expiration Date		ration Date thth/Day/Year) S S S S Expiration		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4) Amoun or Numbo of Title Shares		unt ber		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (instr. 4)		hip D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

Explanation of Responses:

1. These shares were acquired pursuant to Artivion Inc.'s Employee Stock Purchase Plan (ESPP). The shares were acquired in transactions exempt pursuant to 16b-3.

Remarks:

/s/ John E. Davis

01/29/2024

** 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.