FORM 4

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

Washington, D.C. 20549

OMB APPROVAL									
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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

Name and Address of Reporting Person*     LEE DAVID ASHLEY						2. Issuer Name <b>and</b> Ticker or Trading Symbol  CRYOLIFE INC [ CRY ]											Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner						
(Last) (First) (Middle) CRYOLIFE, INC.						3. Date of Earliest Transaction (Month/Day/Year) 12/04/2014											Office below	r (give title	P, CC	Other (s below)	specify		
1655 ROBERTS BLVD, NW							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					
KENNESAW GA 30144																	Form filed by More than One Reporting Person						
(City)	(S	tate) (	Zip)																				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																							
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Yea						2A. Deemed Execution D if any (Month/Day			n Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4				5. Amo Securi Benefi Owned	ies Fo cially (D)		m: Direct or rect (I)	7. Nature of Indirect Beneficial Ownership		
											ode	v	Amount	(A) or (D)	Price		Repor Transa	Following Reported Transaction(s) (Instr. 3 and 4)		tr. 4)	(Instr. 4)		
Common Stock 12/04/2014											M		27,500	A	\$9.73		25	256,109		D			
Common Stock 12/04/2014											F		26,500	D	\$10.5245(1)		) 22	229,609		D			
Common Stock																	5	,000			By Spouse		
Common stock																1,500				By Children			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g., puts, calls, warrants, options, convertible securities)																						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Exe if ar	Deemed cution Date, ny onth/Day/Year)		saction e (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, and 5)		Expiration I e (Month/Day s			ate	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)			3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	e	v	(A)	(D)		Date Exercisabl		Expiration Date	Title	or Nu of	ount mber ares							
Stock Options	\$9.73	12/04/2014			М	М			27,50	0	02/25/2009 <sup>(2)</sup>		02/25/2015	Common Stock 27,5		,500	\$0	0		D			

## **Explanation of Responses:**

- 1. Reflects weighted average price. Range of prices was between \$10.45 to \$10.66. The reporting person will provide upon request by the Commission staff, the issuer, or a security holder of the issuer, full information regarding the number of shares purchased or sold at each separate price.
- 2. Stock option vests 33 1/3% per year beginning on the first anniversary of the grant date (February 25, 2008).

/s/ D. Ashley Lee 12/05/2014

\*\* 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.