UNITED STATES SECURITIES AND EXCHANGE COMMISSION WASHINGTON, D.C. 20549 FORM 4 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP () Check this box if no longer subject to Section 16.

Form 4 or Form 5 obligations may continue. See Instructions 1(b).

1. Name and Address of Reporting Person BLACK, KIRBY S, PH.D. c/o CryoLife, Inc.

1655 Roberts Boulevard, N.W.

Kennesaw, GA 30144

- 2. Issuer Name and Ticker or Trading Symbol CRYOLIFE, INC. CRY
- 3. IRS or Social Security Number of Reporting Person (Voluntary)
- 4. Statement for Month/Year 9/2000
- 5. If Amendment, Date of Original (Month/Year)
- 6. Relationship of Reporting Person(s) to Issuer (Check all applicable) () Director () 10% Owner (X) Officer (give title below) () Other (specify below) Vice President, R&D
- 7. Individual or Joint/Group Filing (Check Applicable Line)
 - (X) Form filed by One Reporting Person
 - () Form filed by More than One Reporting Person

1. Title of Security	2. : Transac Date 0	etion 	Securities Acqua or Disposed of Amount	(D)	'I	5.Amount of Securities Beneficially Owned at End of Month	6.Di ect (D)c Indi ect	or .r	of Indirect ial Ownership
Common Stock	9-5-00 1	1 30	,000	A	\$5.625	31,109	D	I	
Common Stock	1 1			l 		150	I		
Table II Derivati						Owned Fitle and Amount			10. 11.Nature c

Secu- rity	 Date Code V Amount	D cisa- Date of Shares		End of Month	ct (I)	i
Incentive Stock Option \$5.625	9-5-0 M 30,000	D (2) 12-28 Common Stock 30			1 I 1 I	!
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Explanation of Responses:

(1) Includes 90 shares owned by Dr. Black's minor daughter and 60 shares owned by his son.

(2) Options are fully vested. SIGNATURE OF REPORTING PERSON /s/ Kirby S. Black, Ph.D. Kirby S. Black, Ph.D.

DATE

October 4,2000