FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	: 0.5							

	Check this box if no longer subject
	to Section 16. Form 4 or Form 5
\cup	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* BEVEVINO DANIEL J					2. Issuer Name and Ticker or Trading Symbol ARTIVION, INC. [AORT]									(Che	eck all app	ationship of Reporting Person(s) to Issuer k all applicable)			
(Last)			Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/06/2023									'	Office below	er (give title		10% Ov Other (s below)	- 1
ARTIVION INC 1655 ROBERTS BLVD NW					4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street)	(Street) KENNESAW GA 30144														X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(S	tate) (2	Zip)		Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.														
		Table	I - No	n-Deriva	tive S	ecui	rities	Acq	uired, [Disp	osed of	f, or	Bene	eficia	lly Owr	ned			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day				Execut y/Year) if any		Deemed cution Date, y hth/Day/Year)		3. Transaction Code (Instr. Disposed and 5)						5. Amo Securi Benefi Owned Follow	ties cially I	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A (D) or	Price					
Common Stock 06/06/2					2023				A		9,709	09 A		\$ <mark>0</mark>	137,447(1)		D		
		Tab		Derivati (e.g., pu											y Owne	ed			
1. Title of Derivative Security (Instr. 3)	perivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				4. Transaction Code (Instr. 8)		5. Numl of Deriv Secu Acqu (A) of Dispo of (D) (Instr	rative rities ired r osed)	6. Date E Expiratio (Month/D		nd 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and		S (I	. Price of perivative security nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		Expiration Date	Title	Amo or Num of Shar	ber					

Explanation of Responses:

1. RSA Grant vests on June 6th 2024, pursuant to the terms of the Equity and Cash Incentive Plan?

Remarks:

/s/ Daniel J Bevevino 06/07/2023

** 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.