Saurini Sherry M Form 3 June 05, 2018

FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:

3235-0104

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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response... 0.5

(Print or Type Responses)

1. Name and Address of Reporting 2. Date of Event Requiring 3. Issuer Name and Ticker or Trading Symbol Person * Statement CRYOLIFE INC [CRY] Saurini Sherry M (Month/Day/Year) 05/25/2018 (Last) (First) (Middle) 4. Relationship of Reporting 5. If Amendment, Date Original Person(s) to Issuer Filed(Month/Day/Year) 1655 ROBERTS BLVD NW (Check all applicable) (Street) 6. Individual or Joint/Group Filing(Check Applicable Line) 10% Owner Director _X_ Form filed by One Reporting _X__ Officer Other Person KENNESAW, GAÂ 30144 (give title below) (specify below) Form filed by More than One VP, Quality Reporting Person (City) (State) (Zip) **Table I - Non-Derivative Securities Beneficially Owned** 4. Nature of Indirect Beneficial 1. Title of Security 2. Amount of Securities Beneficially Owned Ownership Ownership (Instr. 4) (Instr. 4) Form: (Instr. 5) Direct (D) or Indirect (I) (Instr. 5) D Â Common Stock 27,363 Reminder: Report on a separate line for each class of securities beneficially SEC 1473 (7-02) owned directly or indirectly. 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 control number.

 $Table\ II\ -\ Derivative\ Securities\ Beneficially\ Owned\ (\textit{e.g.},\ puts,\ calls,\ warrants,\ options,\ convertible\ securities)$

| 1. Title of Derivative Security (Instr. 4) | 2. Date Exerc Expiration Da (Month/Day/Year) | | 3. Title and Amount of Securities Underlying Derivative Security (Instr. 4) | | 4. Conversion or Exercise Price of | 5. Ownership Form of Derivative | 6. Nature of Indirect Beneficial Ownership (Instr. 5) |
|--|--|-----------------|--|------------------------|------------------------------------|----------------------------------|--|
| | Date Exercisable | Expiration Date | Title | Amount or Number of | Derivative Security | Security: Direct (D) or Indirect | (IIISU. 3) |

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| | | | | Shares | | (I) (Instr. 5) | |
|-----------------------------|------------|------------|-----------------|--------|----------|-------------------|---|
| Stock Option (Right to Buy) | 02/19/2017 | 02/19/2023 | Common Stock | 14,913 | \$ 10.24 | D | Â |
| Stock Option (Right to Buy) | 03/02/2017 | 03/02/2023 | Common Stock | 12,981 | \$ 10.91 | D | Â |
| Stock Option (Right to Buy) | 02/21/2018 | 02/21/2024 | Common Stock | 8,981 | \$ 16.3 | D | Â |
| Stock Option (Right to Buy) | 03/12/2019 | 03/12/2025 | Common Stock | 9,944 | \$ 21.55 | D | Â |

Reporting Owners

| Reporting Owner Name / Address | Relationships | | | | |
|--|---------------|-----------|----------------|-------|--|
| ·F. · · · · · · · · · · · · · · · · · · | Director | 10% Owner | Officer | Other | |
| Saurini Sherry M 1655 ROBERTS BLVD NW KENNESAW, GA 30144 | Â | Â | VP, Quality | Â | |

Signatures

| /s/ Sherry | 06/05/2018 |
|---------------------------------|------------|
| Saurini | 00/03/2016 |
| **Signature of Reporting Person | Date |

Explanation of Responses:

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *See* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

Reporting Owners 2

^{*} If the form is filed by more than one reporting person, see Instruction 5(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).