## Edgar Filing: Mackin James P - Form 4

Mackin Jan Form 4	nes P										
August 13,	2018										
FORM	ЛД								OMB AF	PROVAL	
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							OMMISSION	OMB Number:	3235-0287		
Check the if no lor subject to Section Form 4 Form 5		SECUI	RITIES			NERSHIP OF	Expires: Estimated a burden hour response				
obligatio may cor <i>See</i> Inst 1(b).	ons Section 17(	a) of the H	Public U		lding Cor	npan	y Act of	1935 or Section			
(Print or Type	Responses)										
1. Name and Address of Reporting Person Mackin James P			2. Issuer Name <b>and</b> Ticker or Trading Symbol CRYOLIFE INC [CRY]					5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last)	(First) (	Middle)	3. Date c	of Earliest T	ransaction			(Check		)	
CRYOLIFE, INC., 1655 ROBERTS BLVD, NW			(Month/Day/Year) 08/10/2018					Director 10% Owner X Officer (give title Other (specify below) President & CEO			
(Street)			Filed(Month/Day/Year)					6. Individual or Joint/Group Filing(Check Applicable Line) _X_Form filed by One Reporting Person			
KENNESA	W, GA 30144							Form filed by Mo Person	ore than One Rej	porting	
(City)	(State)	(Zip)	Tab	le I - Non-	Derivative	Secu	rities Acqu	uired, Disposed of,	or Beneficiall	y Owned	
Security (Month/Day/Year) Execution Date, if Transactionor I		4. Securiti ordr Dispose (Instr. 3, 4	ed of (	(D)	Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
Common				Code V	Amount	(D)	Price \$	(Instr. 3 and 4)			
Common Stock	08/10/2018	08/10/20	18	S	23,523	D	33.033 (1)	7 297,050	D		
Common Stock	08/10/2018	08/10/20	18	S	19,152	D	\$ 33.6730 (2)	6 277,898	D		

Reminder: Report on a separate line for each class of securities beneficially 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.

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 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transacti Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		Date	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owne Follo Repo Trans (Instr
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

## **Reporting Owners**

Reporting Owner Name / Address	Relationships							
Toporoing o whore realized the	Director	10% Owner	Officer	Other				
Mackin James P CRYOLIFE, INC. 1655 ROBERTS BLVD, NW KENNESAW, GA 30144			President & CEO					
Signatures								
/s/ James P. 08 Mackin 08	8/13/2018							

<u>\*\*</u>Signature of Reporting Person Date

## **Explanation of Responses:**

- \* 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).
- (1) Reflects weighted average price. Range of prices were between \$32.80 to \$33.60. 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 sold at each separate price.
- (2) Reflects weighted average price. 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 sold at each separate price.

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.