Edgar Filing: CRYOLIFE INC - Form 4

CRYOLIFE	INC										
Form 4											
March 11, 20)13										
FORM			CECUD							PPROVAL	
	UNITEL) STATES		hington,			NGE (COMMISSION	OMB Number:	3235-0287	
Check thi if no long	ter.								Expires:	January 31, 2005	
subject to		MENT O	F CHAN		ES IN BENEFICIAL OWNERSHIP				Estimated average		
Section 1	Section 16. SECURITIES						burden hours per				
Form 4 or Form 5			C	$(\cdot) \cdot f + 1$. C			- A - + - £ 1024	response	0.5	
obligation	.						-	ge Act of 1934, f 1935 or Section	n		
may cont See Instru 1(b).	inue.		of the Inv	•	•	· ·			11		
(Print or Type F	Responses)										
1. Name and Address of Reporting Person <u>*</u> FRONK DAVID			2. Issuer Name and Ticker or Trading Symbol CRYOLIFE INC [CRY]				ıg	5. Relationship of Reporting Person(s) to Issuer			
(Least)	(First)	(Middle)						(Chec	k all applicable	e)	
(Last)	(First)	(Middle)	3. Date of (Month/Da	Earliest Tra	ansaction			Director	10%	Owner	
CRYOLIFE BLVD., NW	, INC., 1655 RG	OBERTS	03/07/20	•				X Officer (give below)		er (specify	
	(Street)		4. If Amer	ndment, Da	te Original			6. Individual or Jo	oint/Group Filin	1g(Check	
				led(Month/Day/Year)				Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
KENNESA	W, GA 30144							Person		porting	
(City)	(State)	(Zip)	Table	e I - Non-D	erivative	Securi	ities Aco	quired, Disposed of	f, or Beneficial	lly Owned	
1.Title of Security (Instr. 3)	2. Transaction Da (Month/Day/Yea	r) Execution any	emed on Date, if Day/Year)	3. Transactic Code (Instr. 8)	on(A) or D (D)	ispose	d of	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		
				Code V	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)			
Common Stock	03/07/2013			F	3,018 (1)	D	\$ 6.08	94,714	D		

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02) required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactic Code (Instr. 8)	5. ofNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Under Secur	rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secu Bene Owna 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							
	Director	10% Owner	Officer	Other				
FRONK DAVID CRYOLIFE, INC. 1655 ROBERTS BLVD., NW KENNESAW, GA 30144			VP Reg. Affrs. and Qual Assur.					
Signatures								
/s/ David Fronk 03/	/08/2013							

<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) These shares were withheld upon the vesting of performance shares to pay tax withholding obligations.

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.