Edgar Filing: Bogenschuetz Thomas J - Form 4

Bogenschuet	tz Thomas J										
Form 4											
March 18, 20											
FORM	$14_{\rm UNITED}$	STATES	SECUE	TTIFS A	ND FX	٦НА	NGE C	OMMISSION		PROVAL	
	UNITED			shington,					OMB Number:	3235-0287	
Check th				8,					Expires:	January 31,	
if no long subject to		ENT O	F CHAN	GES IN	BENEF	[CIA	LOW	NERSHIP OF	200		
Section 1							Estimated average burden hours per				
Form 4 o Form 5			~ • •		~ .		_		response	. 0.5	
obligation	n c *	Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section									
may cont	tinue. Section 17(a			vestment	•	- ·			1		
See Instru 1(b).	uction	50(II)	of the m	vestment	Compan	y At	101194	0			
1(0).											
(Print or Type I	Responses)										
				r Name and	Ticker or	Tradiı	ng	5. Relationship of Reporting Person(s) to Issuer			
Bogenschuetz Thomas J Symbol								155401			
			CRYOI	LIFE INC				(Checl	k all applicable)	
(Last)	(First) (N	Biddle) 3. Date of Earliest Transaction						100	0		
CRYOI IFF	E, INC., 1655 ROI	SEBLE	(Month/E 03/14/2	-				Director X Officer (give		Owner er (specify	
BLVD, NW		JERIS	03/14/2	019				below)	below)		
22,2,1,1,1									& General Ma	-	
	(Street)			ndment, Da	-	l		6. Individual or Jo	int/Group Filin	g(Check	
			Filed(Mor	nth/Day/Year)			Applicable Line) _X_ Form filed by C	One Reporting Pe	rson	
KENNESA	W, GA 30144							Form filed by M			
		(T)						Person			
(City)	(State)	(Zip)	Tabl	e I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of	2. Transaction Date			3.	4. Securi			5. Amount of	6. Ownership		
Security (Instr. 3)	(Month/Day/Year)		ion Date, if Transaction(A) or Disposed of (D)					Securities Beneficially	Form: Direct (D) or	Indirect Beneficial	
(IIISU. 5)		any (Month/I	Code (Instr. 3, 4 and 5) /Day/Year) (Instr. 8)				3)	Owned	· /	Ownership	
			. ,	. ,				Following	(Instr. 4)	(Instr. 4)	
						(A)		Reported Transaction(s)			
						or	D ·	(Instr. 3 and 4)			
Common				Code V	Amount 3,092	(D)	Price				
Stock	03/14/2019	03/14/2	2019	А	(1)	Α	\$0	21,350	D		
					_		¢				
Common Stock	03/14/2019	03/14/2	2019	F	735 <u>(2)</u>	D	\$ 28.92	20,615	D		

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

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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. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)		ate	Amou Unde Secur	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						
1 8	Director	10% Owner	Officer	Other			
Bogenschuetz Thomas J CRYOLIFE, INC. 1655 ROBERTS BLVD, NW KENNESAW, GA 30144			VP, EMEA & General Manager				
Signatures							

/s/ Thomas J. Bogenschuetz	03/18/2019		
**Signature of Reporting	Date		

Person

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).

Represents performance stock units granted on March 12, 2018 and earned at approximately 80% of target based on 2018 adjusted
(1) EBITDA. Fifty percent (50%) were issued on March 14, 2018. The remaining shares earned in connection with the March 2018 grant will

- vest and be issued as follows: 50% on 03/12/2020, and 50% on 03/12/2021, assuming continued employment on the relevant vesting date.
- (2) These shares were withheld upon the vesting of performance stock units 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.