CRYOLIFE INC Form 4/A March 09, 2006

FORM 4

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF

30(h) of the Investment Company Act of 1940

OMB APPROVAL OMB

3235-0287 Number:

Expires:

January 31, 2005

Estimated average burden hours per

response... 0.5

Check this box if no longer subject to Section 16. Form 4 or Form 5

SECURITIES Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, obligations Section 17(a) of the Public Utility Holding Company Act of 1935 or Section may continue.

1(b).

(Print or Type Responses)

See Instruction

1. Name and A HEACOX A	Symbol	2. Issuer Name and Ticker or Trading Symbol CRYOLIFE INC [CRY]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last)	(First) (M	(Month	of Earliest Tr Day/Year)	ansaction			DirectorX Officer (gi	109	% Owner	
BOULEVA		DERTS 02/21/	2000				below)	below) P Research and I		
			4. If Amendment, Date Original Filed(Month/Day/Year) 02/23/2006				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
KENNESA	W, GA 30144						Person	More than One R	eporting	
(City)	Table 1 - Non-Derivative Securities Acquired, Disposed of, of Deficiciany Owned									
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)		Code	onAcquired Disposed (Instr. 3,	l (A) o l of (D))	Beneficially (D) or B Owned Indirect (I) C Following (Instr. 4) (I Reported Transaction(s) (Instr. 3 and 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock	02/21/2006		A	4,250	A	\$0	9,250	D		
Common Stock							5,346	I (1)	By Trust	
Common Stock							45,000	I (2)	By Trust	
Common Stock							200	I (3)	By Trusts	

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

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(9-02)

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. Transaction Code (Instr. 8)	5. Number of orDerivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount o Underlying Securities (Instr. 3 and 4)	
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Share
Stock Option	\$ 4.25	02/21/2006		A	25,750	02/21/2007(4)	08/21/2011	Common Stock	25,750

Reporting Owners

Relationships Reporting Owner Name / Address

> Director 10% Owner Officer Other

HEACOX ALBERT E CRYOLIFE, INC. 1655 ROBERTS BOULEVARD, N.W. KENNESAW, GA 30144

Sr. VP Research and Dev.

Signatures

/s/ Albert E. 03/08/2006 Heacox

**Signature of Date Reporting 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).
- **(1)** The 5,346 shares are owned by Albert E. Heacox, Trustee, Albert E. Heacox Living Trust under an agreement dated 10-29-99.
- The 45,000 shares are owned by Dr. Heacox's spouse as Virginia Heacox FBO Virginia Heacox, Trustee, or successor Trustees of the **(2)** Virginia Heacox Living Trust under an agreement dated 10-29-99.
- Includes 100 shares owned by Albert E. Heacox C/F Rachel K. Heacox, UTMA/GA and 100 shares owned by Albert E. Heacox C/F Daniel A. Heacox UTMA/GA. The reporting person disclaims beneficial ownership of all securities held by his daughter and son, and (3) this report should not be deemed an admission that the reporting person is the beneficial owner of such securities for purposes of Section 16 or for any other purpose.

(4) Stock option vests in 20% increments beginning on first anniversary of grant date.

Reporting Owners 2

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Remarks:

This Form 4/A is being transmitted to file the Ex. 24.1 Confirming Statement for the reporting person which was not included 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.