## Edgar Filing: Cryoport, Inc. - Form 4

Cryoport, Inc. Form 4										
November 24,	2015									
FORM	4								PPROVAL	
<b>CURIVI 4</b> UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549							N OMB Number:	3235-0287		
Check this I if no longer subject to Section 16. Form 4 or Form 5 obligations may continu <i>See</i> Instruct	Filed pur ue. Section 17(	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES 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 30(h) of the Investment Company Act of 1940							January 31, 2005 Estimated average burden hours per response 0.5	
1(b). (Print or Type Res	sponses)									
(This of Type net	sponses)									
1. Name and Address of Reporting Person <u>*</u> BERMAN RICHARD J			2. Issuer Name <b>and</b> Ticker or Trading Symbol Cryoport, Inc. [CYRX]			5. Relationship of Reporting Person(s) to Issuer				
			• • •			(Check all applicable)				
(Last) (First) (Middle) C/O CRYOPORT INC., 20382 BARENTS SEA CIRCLE			3. Date of Earliest Transaction (Month/Day/Year) 11/20/2015			X_Director10% Owner Officer (give titleOther (specify below) below)				
	(Street)		4. If Amendment, Date Original Filed(Month/Day/Year)			1	6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person Form filed by More than One Reporting			
LAKE FORE	ST, CA 92630						Person	whole than one R	epotting	
(City)	(State)	(Zip)	Tab	ole I - Non-l	Derivative	Securities A	Acquired, Disposed	of, or Beneficia	lly Owned	
	Transaction Date Ionth/Day/Year)	2A. Deem Execution any (Month/Da	Date, if	3. Transactio Code (Instr. 8) Code V	4. Securit nAcquired Disposed (Instr. 3, 4 Amount	(A) or of (D)	Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Reminder: Report	t on a separate line	for each cl	ass of sec	urities bene	ficially own	ned directly	or indirectly			
	e on a separate find				Perso inform requir	ns who rest nation cont ed to resp ys a curre	spond to the colle tained in this form ond unless the for ntly valid OMB co	i are not rm	SEC 1474 (9-02)	

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5. Number of	6. Date Exercisable and	7. Title and Amount of
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	Transacti	orDerivative	Expiration Date	Underlying Securities
Security	or Exercise		any	Code	Securities	(Month/Day/Year)	(Instr. 3 and 4)

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(Instr. 3)	Price of Derivative Security		(Month/Day/Year)	(Instr. 8)	Acquired (A Disposed of (Instr. 3, 4, 4 5)	(D)				
				Code V	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares
Options to purchase common stock	\$ 3.06	11/20/2015		А	113,300		<u>(1)</u>	08/19/2025	Common Stock	113,300

## **Reporting Owners**

Reporting Owner Name / Addre	ess	Relationships					
F8	Director	10% Owner	Officer	Other			
BERMAN RICHARD J C/O CRYOPORT INC. 20382 BARENTS SEA CIRC LAKE FOREST, CA 92630	CLE X						
Signatures							
/s/ Richard J. Berman	1/24/2015						
<u>**</u> 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) 1/48 of the options vest on the 19th of each month for forty-eight months beginning on 8/19/2015.
- The number of derivative securities beneficially owned relates only to the specific title of derivative security indicated in column 1, and(2) does not include indirect ownership of 1,667 shares of Class B Preferred Stock or 1,112 warrants to purchase common stock indirectly held through reporting person's wife.

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.