FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

| OMB A | PPR | OVA |
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| OMB Number:              | 3235-0287 |
|--------------------------|-----------|
| Estimated average burden |           |
| hours per response:      | 0.5       |

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

|                        |  |          | or decident de(ii) or the invocations demparty rick or to to         |  |  |                      |
|------------------------|--|----------|--|--|--|----------------------|
| 1. Name and Address of | . 0  |          | 2. Issuer Name and Ticker or Trading Symbol  Cryoport, Inc. [ CYRX ] |  | ionship of Reporting Person(s) all applicable) | ) to Issuer          |
| ZECCHINI EDWARD J      |  |          | <u> </u>   | X  | Director                                       | 10% Owner            |
|                        |  |          |  | Officer (give title Other (specify below) below) |  |                      |
| (Last)                 | (First)  | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year)                     |  | below)   | below)               |
| C/O CRYOPORT I         | INC.   |          | 12/31/2020   |  |  |                      |
| 112 WESTWOOD           | (Asst) (First) (Middle)  1/O CRYOPORT INC.  12 WESTWOOD PLACE, SUITE 350  treet) |          |  |  |  |                      |
| (Stroot)               |  |          | 4. If Amendment, Date of Original Filed (Month/Day/Year)             | 6. Indiv   | dual or Joint/Group Filing (Che                | eck Applicable Line) |
| BRENTWOOD              | TN   | 37027    |  | X  | Form filed by One Reporting                    | g Person             |
| BREIT WOOD IN 37027    |  | 37027    |  |  | Form filed by More than One                    | e Reporting Person   |
| (City)                 | (State)  | (Zip)    |  |  |  |                      |

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

| 1. Title of Security (Instr. 3) | 2. Transaction<br>Date<br>(Month/Day/Year) | 2A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | 3.<br>Transac<br>Code (Ir<br>8) |   | 4. Securities Ac<br>Disposed Of (D |               |         | Securities       | Form: Direct (D) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|---------------------------------|---|------------------------------------|---------------|---------|------------------|------------------|---|
|                                 |  |   | Code                            | v | Amount                             | (A) or<br>(D) | Price   | (Instr. 3 and 4) |                  | (mati. 4)   |
| Common Stock                    | 12/31/2020                                 |   | A                               |   | 208                                | A             | \$44.11 | 35,023           | D                |   |

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

|  | 2.<br>Conversion<br>or Exercise<br>Price of<br>Derivative<br>Security | 3. Transaction<br>Date<br>(Month/Day/Year) | 3A. Deemed<br>Execution Date,<br>if any<br>(Month/Day/Year) | Code (Instr. |   | 5. Number of<br>Derivative<br>Securities<br>Acquired (A)<br>or Disposed of<br>(D) (Instr. 3, 4<br>and 5) |     | Expiration Date (Month/Day/Year) |                    | 7. Title and Amount of<br>Securities Underlying<br>Derivative Security (Instr.<br>3 and 4) |                                  | Derivative<br>Security<br>(Instr. 5) | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported | 10.<br>Ownership<br>Form:<br>Direct (D)<br>or Indirect<br>(I) (Instr. 4) | 11. Nature<br>of Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |
|--|---|--|---|--------------|---|--|-----|----------------------------------|--------------------|--|----------------------------------|--------------------------------------|--|--|--|
|  |   |  |   | Code         | v | (A)  | (D) | Date<br>Exercisable              | Expiration<br>Date | Title  | Amount or<br>Number of<br>Shares |                                      | Transaction(s)<br>(Instr. 4)   |  |  |

Explanation of Responses:

/s/ Edward J. Zecchini

01/05/2021

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

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 Number.