FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

APPROVAI

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

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

1. Name and Address of Reporting Person* SCOTT STEPHEN L		2. Date of Event Requiring Statement (Month/Day/Year) 02/20/2008	3. Issuer Name and Ticker or Trading Symbol Cryoport, Inc. [CRYX.OB]				
(Last)	(First)	(Middle)			tionship of Reporting Person(s) all applicable) Director	to Issuer 10% Owner	5. If Amendment, Date of Original Filed (Month/Day/Year)
C/O CRYOPORT, INC. 20382 BARENTS SEA CIRCLE				Officer (give title below)	Other (specify below)		
(Street) LAKE FOREST	CA	92630					Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person
(City)	(State)	(Zip)					Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Beneficially Owned

1. T	itle of Security (Instr. 4)	Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
CO	OMMON STOCK PAR VALUE \$0.001	22,911	I	SELF, AS TRUSTEE FOR SELF

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

1. Title of D	, , ,			3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)		Conversion or Exercise	Form: Direct (D) or	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	Price of Derivative Security	Indirect (I) (Instr. 5)		

Explanation of Responses:

/s/ Stephen L. Scott

02/27/2008

** Signature of Reporting Person

Date

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

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.

 $^{^{\}star}$ If the form is filed by more than one reporting person, see Instruction 5 (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).