FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

| 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

| Name and Address of Reporting Person* SCOTT STEPHEN L | | | 2. Issuer Name and Ticker or Trading Symbol <u>Cryoport, Inc.</u> [CRYX.OB] | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | |
|---|------------|----------|--|---|-----------------------------|-------------------------|--|--|--|
| SCOTT STERMENT | | | | X | Director | 10% Owner | | | |
| | | | | | Officer (give title | Other (specify | | | |
| (Last) | (First) | (Middle) | 3. Date of Earliest Transaction (Month/Day/Year) | | below) | below) | | | |
| C/O CRYOPORT, INC. | | | 03/04/2008 | | | | | | |
| 20382 BARENTS | SEA CIRCLE | | | | | | | | |
| (Ctroot) | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv | idual or Joint/Group Filing | (Check Applicable Line) | | | |
| (Street) LAKE FOREST | CA | 92630 | | X | Form filed by One Repo | rting Person | | | |
| LAKE FOREST | CA | 92030 | | | Form filed by More than | One Reporting Person | | | |
| (City) | (State) | (Zip) | | | | | | | |

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

| 1. Title of Security (Instr. 3) | 2. Transaction Date (Month/Day/Year) | 2A. Deemed Execution Date, if any (Month/Day/Year) | 3. Transaction Code (Instr. 8) | | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5) | | | 5. Amount of Securities Beneficially Owned Following Reported Transaction(s) | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership (Instr. 4) |
|---------------------------------|--|---|---|---|--|---------------|--------|--|---|---|
| | | | Code | v | Amount | (A) or (D) | Price | (Instr. 3 and 4) | | (instr. 4) |
| COMMON STOCK PAR VALUE \$0.001 | 03/04/2008 | | I | v | 2,600 | D | \$1.12 | 13,311 | I | TRUST FOR SELF |
| COMMON STOCK PAR VALUE \$0.001 | 03/04/2008 | | I | v | 2,400 | D | \$1.1 | 10,911 | I | TRUST FOR SELF |
| COMMON STOCK PAR VALUE \$0.001 | 03/05/2008 | | I | v | 1,400 | D | \$1.1 | 9,511 | I | TRUST FOR SELF |
| COMMON STOCK PAR VALUE \$0.001 | 03/05/2008 | | I | v | 600 | D | \$1.13 | 8,911 | I | TRUST FOR SELF |
| COMMON STOCK PAR VALUE \$0.001 | 03/05/2008 | | I | v | 500 | D | \$1.12 | 8,411 | I | TRUST FOR SELF |

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 Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | derivative Securities Beneficially Owned Following Reported | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
|--|---|--|---|---|---|--|-----|---------------------|--------------------|--|----------------------------------|---|--|--|--|
| | | | | Code | v | (A) | (D) | Date Exercisable | Expiration Date | Title | Amount or Number of Shares | | Transaction(s) (Instr. 4) | | |

Explanation of Responses:

/s/ Stephen L. Scott

03/06/2008

** 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 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).