FORM 5

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
vvasiliigtoii,	D.C.	20070

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL **OWNERSHIP**

OMB APPR	OVAL						
OMB Number:	3235-0362						
Estimated average burden							
hours per response:	1.0						

Form 3 Holdings Reported.

Instruction 1(b)

Form 4 T	Fransactions R	eported.	File	ed pursuant to or Sectior					ities Excha ompany Ad								
1. Name and Address of Reporting Person* HOLTZ DAVID B				2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART]						5. Relationship of Repor (Check all applicable) Director				10%	o Issuer o Owner er (specify		
(Last) (First) (Middle) 311 C ENTERPRISE DRIVE				3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2004					/Year)	X Officer (give title Other (specify below) Sr. VP, Finance, Treasurer,							
(Street) PLAINSB (City)	ORO NJ		8536 Zip)	4. If Amen	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person												
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
Date (Month/Day/Year)		Execution Date, if any		3. Transaction Code (Instr. 8) 4. Securities Of (D) (Instr. 3) Amount				or Dispose	Securit Benefic		ies cially	6. Ownership Form: Direct (D) or	n: Direct	7. Nature of Indirect Beneficial Ownership			
						Amour	nt	(A) or (D)	Price		Issuer's Fiscal Year (Instr. 3 and 4)			rect (I)	(Instr. 4)		
Common Stock 12/31/2004			12/31/2004	J ⁽¹⁾		1)	2	45	A	\$24.36		16,111			D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
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)	of	r osed (, 3, 4	Expiration Date (Month/Day/Year) ities red seed 3, 4		ear)	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amou or Numb of Title Share:		nt er		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	Beneficial Ownership tt (Instr. 4)

Explanation of Responses:

1. Shares acquired pursuant to Integra LifeSciences' Employee Stock Purchase Plan under Section 423 of the Internal Revenue Code of 1986, as amended, in a transaction exempt under Rule 16b-3 of the Securities Exchange Act of 1934, as amended.

/s/ David B. Holtz

02/09/2005

** Signature of Reporting Person

Date

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

- * 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.