FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

nington, D.C. 20549	OMB APPROVAL

н							
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ı	hours per response:	0.5					

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

1. Name and Address of Reporting Person* SCHADE CHRISTIAN S							2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
SCHADE CHRISTIAN S							CORP [IART]										10% Ow		/ner			
(Last) (First) (Middle) 311 C ENTERPRISE DR							3. Date of Earliest Transaction (Month/Day/Year) 05/10/2019											Other (s below)	pecify			
JII C LI	VILICI ICISI	Ľ	05/10/2015																			
(Street)		_ 4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable										
PLAINSBORO NJ 08536															Form filed by One Reporting Person							
(City) (State) (Zip)															Form filed by More than One Reporting Person							
(- 3)																						
		Tă	able I - N	lon-Dei	rıvatı	ve S	ecur	ities Ac	quire	_	sposed of			ially C	wned							
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day)						Execution Date			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and			Benefic		s	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
							(Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Common Stock 05/10/20)19		M		15,658	A	\$21.965		48,291		D						
Common Stock 05/10/20)/2019	019			S		15,658	D	\$51.5	5601(1)	32,	32,633		D				
			Table I								oosed of, o				vned				•			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	n Date,	4. Transa Code (8)				Expiration (Month/Da			7. Title and Amou of Securities Underlying Derivative Securi (Instr. 3 and 4)		curity	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported	Ov Fo Dii or (I)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code	v	(A)	(D)	Da: Ex:	te ercisable	Expiration Date	Title	or Nu of	nount mber ares		Transacti (Instr. 4)	on(s)					
Non- Qualified Stock Option (right to	\$21.965 ⁽²⁾⁽³⁾	05/10/2019	05/10/2019		М			15,658 ⁽²⁾⁽³	3)	(4)	05/17/2019	Comm Stock		5,658	\$0.00	0		D				

Explanation of Responses:

- 1. The price shown above represents the weighted average price of the shares sold. The range of sale prices was \$51.50 to \$52.50.
- 2. This option was previously reported as covering 7,500 shares at an exercise price of \$50.78 per share, but was adjusted pursuant to the anti-dilution provisions of the award in connection with the spin-off of SeaSpine Holdings Corporation on July 1, 2015 to 7,829 shares of common stock at an exercise price of \$43.93 per share.
- 3. In accordance with the terms of the stock option plan, the exercise price of the option and number of shares subject to the option have been adjusted to reflect the two-for-one stock split that occurred on December 21, 2016.
- 4. 25% of the stock options vested every quarter from the grant date of 5/19/2011

Remarks:

/s/ Eric Schwartz; Attorney-in-

05/14/2019

Fact

** 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.