FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## OMB APPROVAL

OMB Number:	3235-0287								
Estimated average burden									
hours per response	9: 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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

1. Name and Address of Reporting Person* <u>Murphy Raymond G.</u>					IN	2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [ IART ]									Check a	onship of Reporting I Il applicable) Director		ng Perso	Person(s) to Issuer  10% Owner		
(Last) (First) (Middle) 311 ENTERPRISE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 05/22/2015											Officer (give title below)		Other (specify below)			
(Street) PLAINSBORO NJ 08536 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person						
			Tabl	e I - Nor	n-Deriv	ative	Se	curiti	es Ac	quired,	Dis	posed o	f, or	Ben	efici	ally O	wned				
Da Da				2. Transaction Date (Month/Day/Year)		ar)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code (	Transaction Disposed Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			4 and Securi Benef Owner		s lly ollowing	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	,  т	Reported Transaction(s) (Instr. 3 and 4)				(instr. 4)	
Common Stock 05/2					05/22	2/2015				A		2,296	6 A \$		\$0.	.00	0 26,715			D	
			Та	ble II - II. )								sed of, onvertib					ned				
1. Title of Derivative Security (Instr. 3)	ivative Conversion Date Execution urity or Exercise (Month/Day/Year) if any		Date,	4. Transaction Code (Instr.) 8)		n of Deri Secondary Acq (A) of Disp of (I (Instand	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Date Exercisable and expiration Date Month/Day/Year)  Date Expiration Date exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of		ount nber	t		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		vnership rm: ect (D) Indirect (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

Remarks:

/s/ Richard D. Gorelick; Attorney-in-Fact 05/27/2015

\*\* 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.