FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287 Estimated average burden 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).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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* <u>Corbin Jerry E</u>						IN	2. Issuer Name and Ticker or Trading Symbol  INTEGRA LIFESCIENCES HOLDINGS  CORP [ IART ]									Check all a	ship of Reportin applicable) rector ficer (give title	g Person(s) to Is		
(Last) (First) (Middle) 311 ENTERPRISE DRIVE							3. Date of Earliest Transaction (Month/Day/Year) 04/01/2014									X Officer (give title Other (spec below) below)  Corp VP & Corporate Controller				
(Street) PLAINS	LAINSBORO NJ 08536					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				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transa Date (Month/D						Execution					Disposed	4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4 5)			nd Sed Ber Ow	mount of urities eficially ned Following orted	6. Owner Form: Di (D) or Ind (I) (Instr.	rect lirect	7. Nature of Indirect Beneficial Ownership	
										Code	v	Amount		(A) or (D)	Price	Tra	nsaction(s) tr. 3 and 4)			(Instr. 4)
Common Stock 04/02						L/2014	-			F		280		D	\$45	5.96	8,156			
Common Stock 04/0					04/02	04/02/2014						472		D	\$45	5.96	7,684			
	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 Exercis Price of Derivative Security	on Da se (M	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Da	Date,		Transaction Code (Instr.		of		exercis on Dat Day/Ye		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)			8. Price of Derivative Security (Instr. 5)		Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	: t (D) lirect	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	of	nber							

**Explanation of Responses:** 

Remarks:

/s/ Kathryn Lamping; Attorney-in-Fact 04/03/2014

\*\* 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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).