FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

					UI S	Secu	011 30(1	i) or tire	IIIVE	Sunen	t Con	ilpariy Act (	JI 194	0								
1. Name and Address of Reporting Person*						2. Issuer Name <b>and</b> Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS										5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Murphy Raymond G.					CORP [ IART ]										X	Direc			10% O	-		
(Last) (First) (Middle)					_	- <del>-</del>											Office	er (give title v)		Other ( below)	specify	
311 ENTERPRISE DRIVE						3. Date of Earliest Transaction (Month/Day/Year) 05/20/2014												,		,		
(Street)				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)										6. Individual or Joint/Group Filing (Check Applicable Line)							
PLAINSBORO NJ 08536															X		rm filed by One Reporting Person rm filed by More than One Reporting					
(City)	(S	tate)	(Zip)														erson					
		Tab	le I - Noi	n-Deriv	ative	Se	curiti	es Ac	qui	ired,	Dis	posed o	f, or	Bene	efici	ally (	Owne	ed				
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Executio			,	Transaction Dispose Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3,			nd	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
										Code	v	Amount	(	A) or D)	Price	. 1	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Common Stock 05/20/					)/2014	/2014			A		1,693		A	\$0.00		21,597			D			
Common Stock 05/20/					)/2014	/2014				A		2,822		A	\$0.00		24,419			D		
	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. Conversior or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/Da	Date,	4. Transactior Code (Instr. 8)				Ex	Date Expiration	n Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		str. 3			9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	, C F C O (1	LO. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code		(4)	(D)	Da	ate		Expiration	or		ount nber							

**Explanation of Responses:** 

Remarks:

/s/ Richard Gorelick; Attorney-05/22/2014

in-Fact

\*\* 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> 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).