FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB Number:	3235-028
Estimated average	hurden

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

OMB APPROVAL								
OMB Number: 3235-02								
Estimated average burden								
hours per response:	0.5							

1. Name and Address of Reporting Person* <u>Baltimore Thomas J Jr</u>					2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART]										Check all ap	all applicable) Director		ng Person(s) to Issuer 10% Owner		
	/ELOPME	NT, LLC				3. Date of Earliest Transaction (Month/Day/Year) 06/12/2007										Officer (give title below)		Other below)	(specify	
3 BETHESDA METRO CENTER, SUITE 1000 (Street) BETHESDA MD 20814 (City) (State) (Zip)					4. If	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					
		Tab	le I - Nor	1-Deriv	/ative	Se	curitie	s Ac	quired,	Dis	posed o	f, or	Ben	efici	ally Own	ed				
1. Title of Security (Instr. 3)				2. Transaction Date (Month/Day/Year)		- 1	2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,			nd Secu Bene Owne	5. Amount of Securities Beneficially Owned Following Reported		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount		(A) or (D)	Pric	Trans	ransaction(s) nstr. 3 and 4)			(111511.4)	
Common	Stock			06/1	2/200′	7			A		1,875	5	A	\$	0	D				
Common	Stock			06/1	2/200	7			A		1,115	5	A	\$0 3,293 D						
		Та									sed of, onvertib				y Owned	1				
1. Title of Derivative Security (Instr. 3)	Derivative Security Or Exercise (Month/Day/Year) Execution if any		3A. Deem Execution if any (Month/Da	Date, Transaction Code (Instr		n of	nired r osed) c. 3, 4	Expiratio (Month/D	5. Date Exercisable and Expiration Date Expiration Date Expiration Date Exercisable Date			or	ount nber	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	/ E	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Explanation of Responses:

/s/ Carla Marcinko, Attorney-

in-Fact

** Signature of Reporting Person Date

06/14/2007

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.