FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

| OMB APPROVAL | | | | | |
|--------------------------|---------------|--|--|--|--|
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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* Tru St Partnership, L.P. 2. Date of Event Requiring States (Month/Day/Yea 09/16/2020 | | tatement /Year) | 3. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART] | | | | | |
|---|--|--------------------|--|------------------|-----------------------------------|--|---|--|
| (Last) (First) (Middle) 795 EAST LANCASTER AVENUE SUITE 200 (Street) VILLANOVA PA 19085 (City) (State) (Zip) | - | | 4. Relationship of Reporting Issuer (Check all applicable) Director X Officer (give title below) | 10% C | wner (specify | A Person | pint/Group Filing e Line) by One Reporting by More than One | |
| Table I - Non-Derivative Securities Beneficially Owned | | | | | | | | |
| 1. Title of Security (Instr. 4) | | | 2. Amount of Securities Beneficially Owned (Instr. I) | | | 4. Nature of Indirect Beneficial Ownership (Instr. 5) | | |
| Common Stock | | | 10,291,205(1) | I |) | | | |
| Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) | | | | | | | | |
| 1. Title of Derivative Security (Instr. 4) | 2. Date Exercisable and Expiration Date (Month/Day/Year) | | 3. Title and Amount of Se Underlying Derivative Se (Instr. 4) | curity Convers | | ise Form: | 6. Nature of Indirect Beneficial Ownership (Instr. | |
| | | | | Amount or Number | Price of Derivativ Security | | 5) | |

Explanation of Responses:

1. These securities were previously reported as indirectly beneficially owned by Dr. Richard Caruso. As of the date of this filing, Dr. Caruso may no longer be deemed to be the beneficial ownership of these shares.

Remarks:

<u>Tru St Partnership L.P, By:</u> <u>09/21/2020</u> /s/ <u>Gary DiLella</u>

Date

** Signature of Reporting Person

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 5 (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.