FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

	•
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

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

MOOR (Last)	ADIAN .	rst) (Middle)		3. D 02/	2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART] 3. Date of Earliest Transaction (Month/Day/Year) 02/15/2018										k all app Direct Offict below Corp	er (give title w) VP, Globa	ıl Ops	10% C Other below)	Owner (specify Chn
(Street) PLAINSI (City)	BORO N.		08536 		. 4. 11	Ame	nendment, Date of Original Filed (Month/Day/Year)								5. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					on
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)			2. Transaction Date (Month/Day/Year)		ur) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Code	Transaction Disposed Code (Instr. 5)		ties Acquired (A) d Of (D) (Instr. 3, 4			and Securi Benefi Owned		cially I Following	Forr (D)	Ownership m: Direct or Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	v	Amount		(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(11150.4)			
Common	Stock			02/15	5/2018				А		928(1))	A	\$0	0.00 15,819 D					
Common	Stock			02/15	5/2018				A		1,293((2)	A	\$0	\$0.00 17,112 D					
Common	Stock			02/15	5/2018				A		1,075	(3)	A	\$0	\$0.00 18,187 D					
		Та									sed of, onvertib					wned				
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Dat ecurity or Exercise (Month/Day/Year) if any		Date,	4. Transaction Code (Instr. 8)		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration (Month/E	5. Date Exercisable Expiration Date (Month/Day/Year) Date Exercisable Expir			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4) Amoun or Numbe of Title Shares		nt er		9. Number derivative Securities Beneficially Owned Following Reported Transactior (Instr. 4)	,	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	

Explanation of Responses:

- 1. On February 15, 2018, the Compensation Committee certified that the Company achieved its performance goal for fiscal year 2017, at least a 3% increase in annual revenue over the prior fiscal year, under the March 23, 2015 Performance Stock Award. Accordingly, 34% of the shares will vest on March 23, 2018, the third anniversary of the grant date.
- 2. On February 15, 2018, the Compensation Committee certified that the Company achieved its performance goal for fiscal year 2017, at least 3% and up to a maximum of 11% increase in annual revenue over the prior fiscal year, under the March 14, 2016 Performance Stock Award. Accordingly, 33% of the shares will vest on March 14, 2018 at 150% target, the second anniversary of the grant date.
- 3. On February 15, 2018, the Compensation Committee certified that the Company achieved its performance goal for fiscal year 2017, at least 3% and up to a maximum of 11% increase in annual revenue over the prior fiscal year, under the March 13, 2017 Performance Stock Award. Accordingly, 33% of the shares will vest on March 13, 2018 at 150% target, the first anniversary of the grant date

Remarks:

/s/ Richard D. Gorelick; 02/20/2018 Attorney-in-Fact

** 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 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.