FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Washington, D.C. 20549

STATEMENT OF	CHANGES IN BENI	EFICIAL OWNERSHIP

OMB APPROVAL

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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).

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*  REUVERS DANIEL L.					<u>IN</u>	2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [ IART ]									all app	olicable)	g Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) 311 C ENTERPRISE DRIVE					3. Date of Earliest Transaction (Month/Day/Year) 05/02/2016								Λ	belov	,	below) s. International			
(Street) PLAINSI (City)			08536 (Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indivi Line) X	,				
		Tab	le I - N	on-Deriv	/ative	Sec	uritie	s Ac	quirec	d, Di	sposed o	f, or E	Benefic	ially (	)wne	ed			
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day)				Execution Date		Date,	Transaction Disposed C		es Acquired (A) or Of (D) (Instr. 3, 4 a		nd 5) Secur Benef		icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	t of Indirect				
									Code	v	Amount	(A) o	r Price		Transa	action(s) 3 and 4)		(54)	
Common Stock 05/02/20				2016	016		S		1,000	D \$71		4334	9,747		D				
		Ta	able II -								osed of, convertib				ned				
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercion Price of Derivative Security			if any	emed on Date, (Day/Year)	4. Transactio Code (Inst 8)				6. Date Exercisable Expiration Date (Month/Day/Year)		ite	r) Amount of Securities Underlying Derivative Security (Instr. and 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership ect (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares						

**Explanation of Responses:** 

Remarks:

/s/ Richard D. Gorelick; Attorney-in-Fact 05/04/2016

\*\* Signature of Reporting Person Date

 $Reminder: Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$ 

- $^{\star}$  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.