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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

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

OMB APPROVAL										
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1. Name and Address of Reporting F Burhop Kenneth	Person*	2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify below) below)			
(Last) (First) 311 ENTERPRISE DRIVE	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 02/15/2018	CORPVP,CHIEFSCIENTIFIC OFFICER			
(Street) PLAINSBORO NJ (City) (State)	08536 (Zip)	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			

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code (8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		
Common Stock	02/15/2018		A		762 ⁽¹⁾	Α	\$0.00	8,132	D	
Common Stock	02/15/2018		A		1,293 ⁽²⁾	A	\$0.00	9,425	D	
Common Stock	02/15/2018		A		1 ,263 ⁽³⁾	A	\$0.00	10,688	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title o Derivati Security (Instr. 3)	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

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.

/s/ Richard D. Gorelick;

Attorney-in-Fact

" <u>02/20/2018</u>

** Signature of Reporting Person Date

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.