FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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OIVID APPROVAL										
OMB Number:	3235-0287									
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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

1(0). 36	ee Instruction 1	U																		
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol						5. Relationship of Reporting Person(s) to Issuer (Check all applicable)									
McBreen Michael J.					INTEGRA LIFESCIENCES HOLDINGS							(=::==	Director 10% Own				wner			
-		CORP [IART]							1					specify						
(Last)		3. Date of Earliest Transaction (Month/Day/Year)								below) below) EVP & President, CSS										
1100 CAMPUS ROAD						12/02/2024														
(Street)	4. If Amendment, Date of Original Filed (Month/Day/Year)							6. Individual or Joint/Group Filing (Check Applicable Line)												
PRINCETON NJ 08540														V V	<u>,</u>					
													Form filed by More than One Reporting							
(City)		Person																		
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			and Securi Benefi		ties cially Following	Form	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
						Code V Amount (A) or Pr				ce	Transaction(s) (Instr. 3 and 4)				(111511. 4)					
Common Stock 12/02/20						024 S 1,700 D \$.				\$2	4.155	4.155 56,182 D								
	ſ	1		(e.g., pu	ıts, ca		warr	ants,	optio	ns, o	osed of, convertib	le se	curiti	es)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execut if any	execution Date, fany		4. Transaction Code (Instr. 8) 5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y G	10. Ownership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirec Beneficial Ownershi (Instr. 4)			
					Code	Code V		(D)	Date Exerci	sable	Expiration Date	Title	Amou or Numb of Share	er						

Explanation of Responses:

Remarks:

/s/ Eric Schwartz; Attorney-in-Fact 12/03/2024

** 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.