FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	D.C. 20549	
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
OMB Number: 3235-0287										
Estimated average burden										
hours ner response.										

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

Name and Address of Reporting Person* Schwartz Eric					2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART]								Check	k all applicable) Director		10% (Owner
`	,	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 03/10/2024								X	below)		below)		. ,	
ΓON NJ				4. If Amendment, Date of Original Filed (Month/Day/Year)										idual or Joint/Group Filing (Check Application Form filed by One Reporting Person Form filed by More than One Reporting Person				on
(St				Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.										nded to				
	Table	I - No	n-Deriva	tive S	Secui	rities	Acq	uired,	Dis	posed of	, or B	enefic	ially	Own	ed 			
Date				Execu ny/Year) if any		cution Date, ny		Transaction Disposed Code (Instr. 5)					Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
								Code	v	Amount	(A) or (D)		•	Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Common Stock 03/10/2					2024		F		799	D	\$36	5.73 50,362),362		D		
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																		
2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execut if any	ecution Date, iny onth/Day/Year) Transaction Code (Instr. 8)		of Deriv Secur Acqu (A) or Dispo of (D) (Instr and 5	ative rities ired osed . 3, 4	Expirat (Month/	ion Da /Day/Y	tte ear)	Amou or Numb of		Der Sec (Ins	ivative urity	derivative Securities Beneficiall Owned Following Reported	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	(Fire April 2 Price of Derivative April 2 Price of Derivat	(First) (MPUS ROAD CON NJ 0 (State) (Z Table ecurity (Instr. 3) Stock Tak 2. Conversion or Exercise Price of Derivative (Month/Day/Year)	(First) (Middle) MPUS ROAD ON NJ 08540 (State) (Zip) Table I - No ecurity (Instr. 3) Stock Table II - Conversion or Exercise Price of Derivative (Month/Day/Year) (Month	Table I - Non-Derivate (Month/Day/Year) Stock Table II - Derivation (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year)	Table I - Non-Derivative Security (Instr. 3) Table II - Derivative Security Table II - Derivative Security 3. Da 03/1 4. If A Rul 2. Transaction Date (Month/Day/Year) Table II - Derivative Se (e.g., puts, cate) Execution Date, if any (Month/Day/Year) 3. Transaction Date (Month/Day/Year) A Table II - Derivative Security A Table II - Derivative Se (e.g., puts, cate) Execution Date, if any (Month/Day/Year) A Transaction Date (Month/Day/Year) B A Deemed Execution Date, if any (Month/Day/Year) A Deemed Execution Date, if any (Month/Day/Year) B A Deemed Execution Date, if any (Month/Day/Year) B A Deemed Execution Date, if any (Month/Day/Year)	INTEGENT CORP CORP	CORP IAR	Integral Life	INTEGRA LIFESCIE CORP [IART] 3. Date of Earliest Transaction (I 03/10/2024 4. If Amendment, Date of Original Check this box to indicate that satisfy the affirmative defense of Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 2. Transaction Date (Month/Day/Year) 3. Transaction Code (Instr. Securities Acquired, I (e.g., puts, calls, warrants, option Code (Instr. Security (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 3. Transaction Date (Month/Day/Year) 5. Number of Darivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Date (Month/Day/Year) 4. Transaction Date (Month/Day/Year) 5. Number of Darivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Date (Month/Day/Year) 5. Number of Darivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) Date (D) (Instr. 3, 4 and 5) Date (Month/Day/Year) Date (D) (Instr. 3, 4 and 5) Date (D) (Instr. 3, 4 and 5	INTEGRA LIFESCIENC CORP [IART] 3. Date of Earliest Transaction (Month 03/10/2024 4. If Amendment, Date of Original Filed of	INTEGRA LIFESCIENCES HOLD CORP [IART]	INTEGRA LIFESCIENCES HOLDING	INTEGRA LIFESCIENCES HOLDINGS CORP [IART]	INTEGRA LIFESCIENCES HOLDINGS Core IART	INTEGRA LIFESCIENCES HOLDINGS CORP [IART] Substitution Comparison Compa	INTEGRA LIFESCIENCES HOLDINGS Check all applicable) Director X Officer (give title below) EVP, Chief Leg Officer (give title below) EVP, Chief L	Integral Lifescience Core Core	NTEGRA LIFESCIENCES HOLDINGS Check all applicable Director 10% O Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Samount of Bate Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is interestly (Instr. 3) Check t

Explanation of Responses:

Remarks:

/s/ Eric Schwartz

03/12/2024

** 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.