FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

ashington, D.C. 20549	ashington,	D.C.	20549		
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OIVIB APPROVAL										
OMB Number:	3235-0287									
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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*  Lo Renee Wonlai  (Last) (First) (Middle)  1100 CAMPUS ROAD						2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [ IART ]  3. Date of Earliest Transaction (Month/Day/Year) 07/27/2022									ck all app Direc	licable) tor er (give title	ng Person(s) to Issuer 10% Owner Other (specify below)		wner
(Street) PRINCE (City)			8540 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Inc Line)	′				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day			Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)				Benefic	ties cially Following	Form:	Direct Indirect	7. Nature of Indirect Beneficial Ownership (Instr. 4)						
							Code	v	Amount	(A) or (D) Pr		Price	Transa	saction(s) : 3 and 4)			(1130. 4)		
Common Stock 07/27/2					2022				A		2,969	A	\	\$0.00	2	,969		D	
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	med on Date, Day/Year)	4. Transa Code ( 8)		of	r osed ) c. 3, 4	6. Date Expirati (Month/	on Da Day/Y		Deriv	int of rities rlying ative rity (In	str.	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y C	0. Dwnership Form: Direct (D) or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)

**Explanation of Responses:** 

Remarks:

/s/ Eric Schwartz; Attorney-in-07/28/2022

**Fact** 

\*\* 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.