FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

**OMB APPROVAL** OMB Number: Estimated average burden hours per response: 0.5

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* SCHADE CHRISTIAN S						2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [ IART ]									all applic Directo	able)	g Pers	on(s) to Issu	ner	
(Last) 311 C EN	(First) (Middle) ENTERPRISE DR					3. Date of Earliest Transaction (Month/Day/Year) 03/05/2018									Officer (give title Other below) below				pecify	
(Street) PLAINSBORO NJ 08536					_   4. I	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indivine) X	, i					
(City) (State) (Zip)					<u> </u>	tive Securities Acquired, Disposed of, or Benefic														
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye					tion	2A. Deemed Execution Date,			3. Transactio		4. Securities	f, or Beneficially Acquired (A) or (D) (Instr. 3, 4 and 5)			5. Amount of 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)	Price	Reporte Transac (Instr. 3		tion(s)		[	(Instr. 4)	
Common Stock 03/05/201						8			М		15,658	A	\$18.0	\$18.06		5,326		D		
Common Stock 03/05/201						.8			S		15,658	D	\$52.879	52.8795(1)		9,668		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)	Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	de V		(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares							
Non- Qualified Stock Option (right to	\$18.06	03/05/2018			M			15,658	(2)	)	05/19/2018	Commor Stock	15,658	3	\$0.00	0(3)(4)		D		

## **Explanation of Responses:**

- $1. \ The price shown above represents the weighted average price of the shares sold. The range of sale prices was $52.73 to $53.04.$
- $2.\ 25\%$  of the stock options vest every quarter from the grant date of 5/19/2010
- 3. This option was previously reported as covering 7,500 shares at an exercise price of \$41.75 per share, but was adjusted pursuant to the anti-dilution provisions of the award in connection with the spin-off of SeaSpine Holdings Corporation on July 1, 2015 to 7,829 shares of common stock at an exercise price of \$36.12 per share.
- 4. In accordance with the terms of the stock option plan, the exercise price of the option and number of shares subject to the option have been adjusted to reflect the two-for-one stock split that occurred on December 21, 2016.

## Remarks:

/s/ Richard D. Gorelick; Attorney-in-Fact

03/06/2018

\*\* 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.