Edgar Filing: INTEGRA LIFESCIENCES HOLDINGS CORP - Form 4

INTEGRA I Form 4 July 02, 2014	LIFESCIENCES HOLI	DINGS CORP					
FORM			OMB APPROVAL				
-	COMMISSION OMB Number: 3235-0287						
Check th if no long	ner		Expires: January 31				
subject to Section 1 Form 4 c	16.	OF CHANGES IN BENEFICIAL OW SECURITIES	Estimated average burden hours per				
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction 1(b). Form 5 Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940 1(b). (b). (c) (c) (c) (c) (c) (c) (c) (c)							
(Print or Type I	Responses)						
	Address of Reporting Person BE ROBERT D	 2. Issuer Name and Ticker or Trading Symbol INTEGRA LIFESCIENCES HOLDINGS CORP [IART] 	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
(Last) 311 C ENT	(First) (Middle) ERPRISE DRIVE	3. Date of Earliest Transaction (Month/Day/Year) 07/01/2014	Director 10% Owner X Officer (give title Other (specify below) Corp VP, Pres. Adv Woundcare				
	(Street)	4. If Amendment, Date 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				
PLAINSBC	DRO, NJ 08536		Person				
(City)	(State) (Zip)	Table I - Non-Derivative Securities Acq	uired, Disposed of, or Beneficially Owned				
1.Title of Security (Instr. 3)	any	Deemed 3. 4. Securities Acquired ution Date, if Transaction(A) or Disposed of (D) Code (Instr. 3, 4 and 5) (Instr. 8) (A) or Code V Amount (D) Price	5. Amount of Securities6. Ownership Form: Direct7. Nature of IndirectBeneficially(D) orBeneficialOwnedIndirect (I)OwnershipFollowing(Instr. 4)(Instr. 4)ReportedTransaction(s)(Instr. 3 and 4)				
Common Stock	07/01/2014	F 540 D ^{\$} 47.63	34,480 D				

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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 control number.

 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)	4. Transactio Code (Instr. 8)	5. orNumber of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	;	ate	Secur	unt of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

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Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
PALTRIDGE ROBERT D 311 C ENTERPRISE DRIVE PLAINSBORO, NJ 08536			Corp VP, Pres. Adv Woundcare				
Signatures							
/s/ Richard D. Gorelick; Attorney-in-Fact		07/02/2014					
**Signature of Reporting Person		Date					

Explanation of Responses:

* 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. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.