FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

J obligations may continue. See Instruction 1(b).				pursuan	t to Section 16(a) o	f the Se	curitie	es Exchange A	34		hours per response:		0.5		
					tion 30(h) of the Inv										
Name and Addres <u>Murphy Rayn</u>		son*		2. Issuer Name <b>and</b> Ticker or Trading Symbol  INTEGRA LIFESCIENCES HOLDINGS  CORP [ IART ]							tionship of Reporting Pers all applicable) Director		10% (	10% Owner	
ast) (First) (Middle) 11 ENTERPRISE DRIVE				3. Date 05/17/	of Earliest Transac /2012	ction (M	onth/C	Day/Year)		Officer (give titl below)		Other (specify below)			
Street)				4. If Amendment, Date of Original Filed (Month/Day/Year)								or Joint/Group Filing (Check Applicant			
(City)	SBORO NJ 08536  (State) (Zip)									X		•	e Reporting Pers		
	7	Γable I - Nor	n-Deriva	tive S	ecurities Acqu	uired,	Disp	osed of, c	r Ben	eficially	Owned				
		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Follow Reported	s ally ollowing	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
						Code	v	Amount	mount (A) or (D)		Transaction(s) (Instr. 3 and 4)				
Common Stock			05/17/2	2012		A		2,500	A	\$0.00	12,208		D		

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned

2,216

	(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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr	rative rities pired r osed )	6. Date Exerc Expiration Da (Month/Day/\)	7. Title Amour Securi Under Deriva Securi and 4)	nt of ties lying tive ty (Instr. 3	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

**Explanation of Responses:** 

Remarks:

Common

/s/ Kathryn Lamping; 05/21/2012 Attorney-in-Fact

\*\* Signature of Reporting Person

\$0.00

14,424

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

05/17/2012

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).