Edgar Filing: SULLIVAN JAMES M - Form 4/A

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Form 4/A											
December 09	1	т стате	SECUD	ITIES AT	ND EV(ינוי	NCE	COMMISSION	т	PPROVAL	
	UNIII	DSIAIL		hington,			NGE (OMB Number:	3235-0287	
Check this if no long subject to Section 16 Form 4 or	er STAT 5.								Expires: Estimated a burden hou response	irs per	
Form 5 obligation may conti <i>See</i> Instru 1(b).	nue. Section	17(a) of the		ility Hold	ing Com	pany	Act o	ge Act of 1934, f 1935 or Sectio 40	n		
(Print or Type R	esponses)										
SULLIVAN JAMES M Symbol INTEG			Symbol INTEGH	Name and Ticker or Trading RA LIFESCIENCES NGS CORP [IART]				5. Relationship of Reporting Person(s) to Issuer (Check all applicable)			
(Last) 311 ENTER	(First) PRISE DR	(Middle)	3. Date of (Month/D 08/19/20	•	ansaction	-		X Director Officer (give below)		b Owner er (specify	
				ndment, Date Original th/Day/Year) 008				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
PLAINSBO	RO, NJ 08530	5						Form filed by M Person	More than One Ro	eporting	
(City)	(State)	(Zip)	Table	e I - Non-Do	erivative S	Securi	ties Ac	quired, Disposed o	f, or Beneficia	lly Owned	
1.Title of Security (Instr. 3)	Security (Month/Day/Year) Execution Instr. 3) any		emed on Date, if /Day/Year)	Date, if Transaction Code		ties l (A) o l of (D 4 and (A))	Securities Beneficially Owned	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code V	Amount	or (D)	Price	(Instr. 3 and 4)			
Common stock	08/19/2008			А	1,875	А	\$0	41,671	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)

Reporting Owner Name / Address Director 10% Owner Officer Other SULLIVAN JAMES M Х **311 ENTERPRISE DR** PLAINSBORO, NJ 08536 Signatures /s/ Kathryn Lamping, 12/09/2008 Attorney-in-fact **Signature of Reporting Person Date

Relationships

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3. Transaction Date 3A. Deemed

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.

Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	(Month/Day/Year)	Execution Date, if any (Month/Day/Year)	Transacti Code (Instr. 8)	S. Number ion of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	(Month/Day	Date	Underlying (Instr. 3 and	Securitie
				Code V	,	Date Exercisable	Expiration Date	Title	Amoun or Numbe of Shares
Non-Qualified Stock Option (right to buy)	\$ 47.63	08/19/2008		А	5,039	(1)	08/19/2016	Common Stock	5,03

4.

5. Number

6. Date Exercisable and

7. Title and Amount

Reporting Owners

2.

1. Title of

	_Signature of Reporting reison					
E	xplanation of Responses	S:				
*	If the form is filed by more than one reporting perso	on, see In				

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).

(1) 25% of the options vest every quarter from the grant date 8/19/2008.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.