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SeaSpine Ho	ldings Corp											
Form 4												
July 01, 2016	5											
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION									OMB APPROVAL			
	UNITED) STATES				ND EXO D.C. 205		NGE (COMMISSION	OMB Number:	3235-0287	
Check thi	s box		vv a5	migu	, 11, 1	D.C. 20.	//				January 31,	
if no long		MENT O	F CHAN	GES I	N F	BENEFI	CIA	LOW	NERSHIP OF	Expires: 200 Estimated average		
subject to Section 1)					TIES						
Form 4 or									burden hours per response 0.5			
Form 5	Filed pu	irsuant to	Section 16	6(a) of	the	Securiti	es Ex	cchang	e Act of 1934,			
obligatior may conti		(a) of the	Public Ut	ility H	oldi	ing Com	pany	Act of	f 1935 or Sectio	n		
See Instru		30(h)	of the Inv	vestme	nt (Compan	y Act	of 194	40			
1(b).												
(Print or Type R	Responses)											
1. Name and Address of Reporting Person - Valentine Keith2. Issuer Symbol				suer Name and Ticker or Trading ol					5. Relationship of Reporting Person(s) to Issuer			
(Last)	(First)	(Middle)	3. Date of Earliest Transaction						(Check an applicable)			
				Day/Year)					Director 10% Owner			
	INE HOLDINC		06/30/20)16					X Officer (give below)	e title Otho below)	er (specify	
	ΓΙΟΝ, 5770 AR	RMADA							/	Executive Offic	er	
DRIVE												
				ndment, Date Original					6. Individual or Joint/Group Filing(Check			
				nth/Day/Year)					Applicable Line) _X_ Form filed by One Reporting Person			
CADISDAI									_X_Form filed by 0			
CARLSBAI	D, CA 92008								Person			
(City)	(State)	(Zip)	Table	e I - Nor	1-De	erivative S	Securi	ties Acq	uired, Disposed of	f, or Beneficial	ly Owned	
1.Title of	2. Transaction Da		med	3.					5. Amount of	6. Ownership		
Security	(Month/Day/Yea	1	on Date, if	Transaction(A) or Disposed of				d of	Securities	Form: Direct		
(Instr. 3)		any (Month/			Code (D) (Instr. 8) (Instr. 3, 4 and 5)			5)		(D) or Indirect (I)	Beneficial Ownership	
		(1.101111)	2. uj, 1. cui)	(mour	0)	(mou. o, r unu		.,	Following	(Instr. 4)	(Instr. 4)	
							(A)		Reported			
							or		Transaction(s) (Instr. 3 and 4)			
a				Code	V	Amount	(D)	Price	(mout 5 and 4)			
Common Stock	06/30/2016			A <u>(1)</u>		1,317	А	\$ 8.91	76,417	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	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exer	cisable and	7. Title and	8. Price of	9. Nu
Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amount of	Derivative	Deriv
Security	or Exercise		any	Code	of	(Month/Day	/Year)	Underlying	Security	Secu
(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8)	Derivative	e		Securities	(Instr. 5)	Bene
	Derivative				Securities	1		(Instr. 3 and	4)	Owne
	Security				Acquired					Follo
	•				(A) or					Repo
					Disposed					Trans
					of (D)					(Instr
					(Instr. 3,					
					4, and 5)					
								Amou	unt	
							Б · ./	or		
						Date	Expiration	Title Numl	ber	
						Exercisable	Date	of		
				Code V	(A) (D)			Share	es	
_										
Repo	rtina O	wners								

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Reporting Owner Name / Address		Relationships						
			10% Owner	Officer	Other			
Valentine Keith C/O SEASPINE HOLDINGS CORPORATION 5770 ARMADA DRIVE CARLSBAD, CA 92008				Chief Executive Officer				
Signatures								
/s/ Keith C. Valentine	07/01/2016							

**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).
- These shares were acquired under the Company's 2015 Employee Stock Purchase Plan in transactions that were exempt under both Rule (1) 16b-3(d) and Rule 16b-3(c).

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.