FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vvasimigton, b.o. 20040

STATEMENT	OF C	HANGES	IN BEN	IEFICIAL	<b>OWNERSH</b>	ΙP

l	OMB APPRO	DVAL
	OMB Number:	3235-0287
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Check this box if no longer subject to 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

Name and Address of Reporting Person*     Kirschman David Louis					2. Issuer Name <b>and</b> Ticker or Trading Symbol Xtant Medical Holdings, Inc. [XTNT]								(Ched	Offic	, 10% C	Ssuer  Owner  (specify			
(Last) (First) (Middle) 664 CRUISER LANE				3. Date of Earliest Transaction (Month/Day/Year) 11/18/2015								X	belov			elow)			
(Street) BELGRADE MT 59714				4. If Amendment, Date of 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								
(City)	(St	ate) (	Zip)			Person													
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
Dat				Date	te Ex onth/Day/Year) if a		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			Securi Benef	icially d Following	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)		rice		action(s) 3 and 4)			,
Common Stock				11/18/	/2015				P		1,000	A	\$	2.8624	1,6	598,063	D		
Common Stock				11/19/2015					P		1,000 A		\$	2.9426	426 1,699,063		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)	ivative Conversion Date Execution D urity or Exercise (Month/Day/Year) if any		n Date,	Code (Instr.		n of		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		De See (In:	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	(D)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		(A)		Date Exercisa		Expiration Date	Amour or Number of Title Shares		er					

**Explanation of Responses:** 

/s/ David Kirschman

11/19/2015

\*\* Signature of Reporting Person

Date

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

- $^{\star}$  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.