Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

F CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: Estimated average burden hours per response: 0.5

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person* HOLMES DARREL LEE						2. Issuer Name and Ticker or Trading Symbol Bacterin International Holdings, Inc. [BONE]								5. Relationship of Reportin (Check all applicable) Director Officer (give title			g Person(s) to Issuer 10% Owner Other (specify		
(Last) (First) (Middle) 600 CRUISER LANE						3. Date of Earliest Transaction (Month/Day/Year) 08/29/2012								X Officer (give title Officer (specify below)					
(Street) BELGRA			59714 (Zip)		4.1	4. If Amendment, Date of Original Filed (Month/Day/Y						ay/Year)		ne) X Form Form	•				
		Tab	le I - Nor	n-Deriv	vativ	e Se	curit	ties Ac	quired,	Dis	oosed o	f, or Be	neficia	Ily Owned	ł				
1. Title of Security (Instr. 3) 2. Transa Date (Month/D					Execution Date,			Code	Transaction Dispose Code (Instr. 5)		ities Acquired (A) or d Of (D) (Instr. 3, 4 and		Benefic	es ally Following	Form	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D) Pri		Transac	ransaction(s) nstr. 3 and 4)				
Common Stock 08/29/				29/201	/2012		M		15,00	15,000 A		.1 15	15,000		D				
		-										or Ben ble secu		y Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemee Execution I if any (Month/Day	Date,	4. Transa Code (8)			vative urities uired or oosed O) (Instr.	6. Date E Expiratio (Month/D	n Date		of Securities		Derivative Security	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	e s Illy	10. Ownershi Form: Direct (D) or Indirec (I) (Instr. 4	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisal		expiration Pate	Title	Amoun or Numbe of Shares						
Employee Stock Ontion	\$0.1	08/29/2012			M			15,000	(1)	1	0/09/2013	Common Stock	15,00	\$0	30,00	0	D		

Explanation of Responses:

 $1. \ This \ option \ for \ 45,000 \ shares \ became \ exercisable \ in \ 3 \ equal \ installments, \ beginning \ on \ 10/9/2004$

/s/ Darrel Holmes

08/29/2012

** Signature of Reporting Person Date

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

- * 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.