FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549	
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STATEMENT	OF CHANGES	S IN BENEFICIAL	OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-0287							
Estimated average burden							
hours per response:	0.5						

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* Berlin Ronald G.				2. Issuer Name and Ticker or Trading Symbol Xtant Medical Holdings, Inc. [XTNT]							(Che	elationship o ck all applic Director	able)	g Perso	on(s) to Issu 10% Ow Other (s	ner	
(Last) (First) (Middle) 664 CRUISER LANE					3. Date of Earliest Transaction (Month/Day/Year) 01/15/2019								below)		ef Operations Off		
(Street) BELGRA			59714 (Zip)	4.	4. If Amendment, Date of Original Filed (Month/Day/Year)						Line	Form fil	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
			Da		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Instr. 5)			Securities Beneficia	neficially ned Following		Direct I Indirect E str. 4)	7. Nature of ndirect Beneficial Ownership Instr. 4)			
								Code	v	Amount	(A) o (D)	r Price	Transacti (Instr. 3 a	ction(s)			(111501.4)
Common Stock, \$0.000001 par value													(0		D	
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																
Security or Exercise (Month/Day/Year) if any		Execution Date,	4. Transaction Code (Instr. r) 8)		Derivative Ex		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)			10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)		
				Code	v	(A)		Date Exercisable		kpiration ate	Title	Amount or Number of Shares		(Instr. 4)			
Stock Option (right to buy)	\$2.24	01/15/2019		A		100,000		(1)	01	1/15/2029	Common stock	100,000	\$0	100,00	00	D	

Explanation of Responses:

1. This option vests with respect to 25,000 shares on each of January 15, 2020, January 15, 2021, January 15, 2022 and January 15, 2023, subject to such Reporting Person's continued employment with Xtant Medical Holdings, Inc.

/s/ Amy Culbert, attorney-in-

01/16/2019

fact

** Signature of Reporting Person

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.