FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPRO	OVAL
	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

1. Name and Address of Reporting Person* <u>Kirschman David Louis</u>						2. Issuer Name <b>and</b> Ticker or Trading Symbol  Xtant Medical Holdings, Inc. [XTNT]									Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner					
(Last) (First) (Middle) 664 CRUISER LANE						3. Date of Earliest Transaction (Month/Day/Year) 11/20/2015									^ be	Officer (give title below)  EVP & Chief Scientific Officer				
(Street) BELGRA	BELGRADE MT 59714						4. If Amendment, Date of Original Filed (Month/Day/Year)								Individual or Joint/Group Filing (Check Applicable Line)     X 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																			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da						Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4				d 5) Sec Ber Ow	mount of urities eficially ned Following orted	Form (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	unt (A) or (D)		Price	Trai	nsaction(s) tr. 3 and 4)			(111311.4)		
Common Stock 11/20						2015			P		1,000		4	\$2.94	126	1,700,063		D		
Common	Common Stock 11/20/					2015			P		1,000	) A \$		\$3.0	04 1,701,063			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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deem Execution if any (Month/D	Date, Trans			of		6. Date Exercis Expiration Dat (Month/Day/Ye		e	7. Title and Amount of Securities Underlying Derivative Security (Instrand 4)			8. Price of Derivativ Security (Instr. 5)		F D O (I	0. Ownership Form: Oirect (D) Or Indirect I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amo or Num of Shai	nber						

**Explanation of Responses:** 

/s/ David Kirschman

11/23/2015

\*\* 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.