FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549
-------------	------	-------

STATEMENT OF CHANGES 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(h)

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* Swanson Kent L						2. Issuer Name and Ticker or Trading Symbol Xtant Medical Holdings, Inc. [XTNT]									Relationship of Reporting Person(s) to Issue (Check all applicable) X Director 10% Own			
(Last) (First) (Middle) 664 CRUISER LANE						3. Date of Earliest Transaction (Month/Day/Year) 07/25/2017									Officer (give title below)			r (specify v)
(Street) BELGRA			59714 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Applicabline) X Form filed by One Reporting Person Form filed by More than One Reporting Person											rson	
		Tabl	e I - N	on-Deri	vative	Sec	uritie	s Ac	quire	d, Di	sposed o	f, or E	Benefic	ally Ov	vned			
Date			Date	e Exe nth/Day/Year) if ar		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction [4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a 5)			d Secu Bene Own	nount of irities eficially ed Following	Form (D) o	n: Direct r Indirect sstr. 4)	7. Nature of Indirect Beneficial Ownership	
		Code	v					Amount	(A) or (D) Pric		Repo Tran (Inst	saction(s) r. 3 and 4)			(Instr. 4)			
Common	Stock			07/25/	2017				A		51,948(1)) A	\$0		318,641 D			
Common	Stock													1 20 000 1 1 1 2				By Limited Partnership
		Та	ble II								osed of, convertib				ed			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	conversion Date Execution Date, Transaction Code (Instr. Code (Instr.				ative rities ired osed	6. Date Exercisable and Expiration Date (Month/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (Inst and 4)				nt of ties ying tive	8. Price Derivati Security (Instr. 5	ve derivativ / Securitie	re es ally g d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

/s/ Kent L. Swanson

07/27/2017

** 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.

^{1.} The common stock vests on July 25, 2018.