Instruction 1(b).

FORM 4

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

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL

OMB Number: 3235-0287

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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*     Davidar David D					2. Issuer Name and Ticker or Trading Symbol GLOBUS MEDICAL INC [ GMED ]								eck all applic	cable) or	ng Pers	son(s) to Issu 10% Ow	ner	
(Last) (First) (Middle) VALLEY FORGE BUSINESS CENTER					3. Date of Earliest Transaction (Month/Day/Year) 01/22/2018								Officer (give title Other (specify below) below)					
2560 GENERAL ARMISTEAD AVENUE  (Street)  AUDUBON PA 19403				4.	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 Person					
(City)	(S	tate)	(Zip)										. 0.00.					
		Tab	le I - Non-D	erivativ	e Se	curities	s Ac	quired, D	ispose	d of, or	Ben	eficiall	y Owned					
Date			Transaction te onth/Day/Y	Execution Date,			Code (Ins	Transaction Dispose Code (Instr. 5)		ities Acquired (A) d Of (D) (Instr. 3, 4			es ally Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
							Code V	Amou	ınt (	(A) or (D)		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
		-	Fable II - De e.ç(					uired, Dis s, options					Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Da if any (Month/Day/Y	Code (Ins				6. Date Exercisable and Expiration Date (Month/Day/Year)		of Se Unde Deriv	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported Transacti (Instr. 4)	Ownersh Form: Direct (D or Indire (I) (Instr.	Ownership	Beneficial Ownership ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	on Title	1	Amount or Number of Shares						
Stock Option (Right to Buy Class A Common Stock)	\$43.77	01/22/2018		A		25,000		(1)	01/22/20	Class 28 Comr Stoo	non 2	25,000	\$0.00	25,00	0	D		

## **Explanation of Responses:**

1. These options vest over a three-year period with one-twelfth (1/12) of the options granted vesting on March 31, 2018, and the balance of the options granted vesting ratably on a quarterly basis over the following 11 quarters.

## Remarks:

/s/ Eric I. Schwartz, Attorney-

in-Fact

\*\* Signature of Reporting Person Date

01/24/2018

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.