FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C	20549	
wasiiiigtoii,	D.C.	20343	

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(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* Peters Stanley W III					2. Issuer Name and Ticker or Trading Symbol CONMED Corp [CNMD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner X Officer (give title Other (specify						
(Last) (First) (Middle) C/O CONMED CORPORATION 11311 CONCEPT BOULEVARD						3. Date of Earliest Transaction (Month/Day/Year) 02/25/2022									below)	below) VP GM Advance			specify
(Street)	FI		33773		_ 4. I	f Amer	ıdmer	nt, Date	e of Orig	inal Fi	led (Month/D	6. Indi Line) X	fividual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	(5)	-	(Zip) le I - l	Non-Deri	vative	Sec	uriti	es A	cauire	ed. D	isposed o	of. or B	enefic	cially	Owned				
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 ar		(A) or		5. Amount of		Forn (D) c	n: Direct or Indirect	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)		
Common Stock			02/25/2	022)22			M		2,700	A	\$39	0.87	2,	2,763		D		
Common Stock		02/25/2	2022				S		2,700	D	\$1	148		63		D			
Common Stock			02/25/2	2022				M		8,000	A	\$41	.93	8,	,063		D		
Common Stock 02/25/2			022	22		S		6,418	D	\$148.	\$148.357 ⁽¹⁾		1,645		D				
Common Stock 02/25/202				022	22		S		1,582	D	\$149.356(2)		63			D			
		Т	able								sposed of , converti				wned				
1. Title of Derivative Security 2. Conversion or Exercise Price of Derivative Security 3. Transaction Date Execution D if any (Month/Day/Year) (Month/Day/		eemed tion Date,	4. Transacti Code (Ins		5. Number of		6. Date Exer Expiration D (Month/Day/		cisable and ate	7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. D S	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exerci	sable	Expiration Date	Title	Amo or Num of Shar	ber					
Options To Purchase Common Stock	\$39.87	02/25/2022			M			2,700	(3	3)	03/01/2026	Commor Stock	2,70	00	\$0	0		D	
Options To Purchase	\$41.93	02/25/2022			M			8,000	(3	3)	03/01/2027	Commor Stock	8,00	00	\$0	25,000		D	

Explanation of Responses:

Stock

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$148.00 to \$148.93. Full information regarding the number of shares sold at each separate price will be provided upon request of the Commission staff, CONMED, or a CONMED security holder.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$149.04 to \$149.80. Full information regarding the number of shares sold at each separate price will be provided upon request of the Commission staff, CONMED, or a CONMED security holder.
- 3. The stock options were granted under the Company's 2015 Amended and Restated Long-Term Incentive Plan and generally vest in equal amounts over a five year period.

/s/ Sarah M. Oliker for Stanley

W. Peters III by Power of 02/28/2022

Attorney

** 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.