SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
OMB Number: 3235-0287
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0.5

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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).
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## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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 <sup>*</sup> SHAGORY PETER K					2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>CONMED Corp</u> [ CNMD ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner					
SHAGORI FETER K															or (give title		0% Ow her (s	-	
						3. Date of Earliest Transaction (Month/Day/Year)									(give lille		elow)	pecity	
(Last) (First) (Middle)						06/09/2023								EVP,	STRAT	& CORP	DEV	Г	
C/O CONMED CORPORATION								wine al		(Manth/Da		(		مانينان ما مع	laint/Craw		a al i A m	aliaabla	
11311 CONCEPT BOULEVARD					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
														X Form f	iled by One	e Reporting	Perso	n	
(Street)														Form f	iled by Mo	re than One	Repo	rting	
LARGO FL 33773													Persor	ı					
(City)	(Sta	te) (Z	Zip)	Rule 10b5-1(c) Transaction Indication															
	Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.													d to					
		Table	e I - No	n-Deriva	ative S	Securities A	cquir	ed,	Dis	posed o	of, c	or Ben	eficial	ly Owned	ł				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					2A. Deemed Execution Date if any (Month/Day/Yea	Co	Transaction Disposed Code (Instr.			ies Of	Acquired (D) (Instr	l (A) or . 3, 4 and	Benefic	es ally Following	6. Owners Form: Dire (D) or Indi (I) (Instr. 4	ect ( rect (	7. Nature of Indirect Beneficial Ownership		
							Cod	de	v	Amount		(A) or	Price	Reporte Transac	tion(s)			(Instr. 4)	
												(D)		(Instr. 3	and 4)				
Common Stock 06/09/2					2023		N	M		4,500		A	\$55.42	2 6,	361	D			
Common Stock 06/09/2				2023			F		2,650 D \$		\$132.4	4 3,	3,711						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
1. Title of	2.	3. Transaction	3A. Dee		4.	5. Numbe						Title and		8. Price of	9. Number			11. Nature	
Derivative Security (Instr. 3)	Security or Exercise (Month/Day/Year) if any		· ·	Transad Code (I 8)		(Mor	iration Date nth/Day/Year)			Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)		l Security	Derivative Security (Instr. 5) Beneficia Owned Followim Reported Transact (Instr. 4)		Forr Ily Dire or In (I) (II	ership n: ct (D) direct nstr. 4)	of Indirect Beneficial Ownershij (Instr. 4)		

or Number of Shares Expiration Date Date v Code (A) (D) Exercisable Title Sars (Stock Commo Appreciation Rights) \$55.42 06/09/2023 м 4 500 (1)05/11/2025 4,500 \$<mark>0</mark> 4,500 D Stock Explanation of Responses:

1. The stock appreciation rights ("SARs") were granted under the Company's 1999 Amended and Restated Long-Term Incentive Plan and generally vest in equal amounts over a five year period.

Daniel S. Jonas for Peter K.

Shagory by Power of Attorney

Amount

\*\* Signature of Reporting Person Date

06/12/2023

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.