FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Check this box if no longer subject to
Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b)

1. Name and Address of Reporting Person*

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

5. Relationship of Reporting Person(s) to Issuer

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

2. Issuer Name and Ticker or Trading Symbol

OMB APPROVAL									
OMB Number:	3235-0287								
Estimated average burden									
hours per respons	e: 0.5								

(Last) C/O CON	DANIEL (Firs MED CORI	st) (f	Middle)		3. D	CONMED CORP [CNMD] 3. Date of Earliest Transaction (Month/Day/Year) 08/06/2019 4. If Amendment, Date of Original Filed (Month/Day/Year)								below)	r (give title		10% Ow Other (s below)	pecify	
(Street) UTICA (City)	NY	. 1	3502-599 Zip))4	4. If								Line	Individual or Joint/Group Filing (Check Applicatione) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
		Tab	le I - No	n-Deriv	/ative	Se	curiti	ies Acc	uired,	Dis	posed o	f, or Ber	neficially	y Owned					
1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Year)		ar) E	2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A)			Beneficia Owned F	s ally	Form:	Direct II	7. Nature of ndirect Beneficial Ownership			
							,		Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)			[Instr. 4)	
Common Stock				08/06/2019)			M		12,000	12,000 A		7 28,	28,319		D		
Common Stock				08/06/2019)			F		8,598	D	\$92.0	1 19,	19,721		D		
Common Stock			08/06	08/06/2019				M		1,560	1,560 A		21,	21,281		D			
Common Stock			08/06	08/06/2019				F		1,157	D	\$92.94	4 20,	20,124		D			
Common Stock			08/06	08/06/2019				S		2,909	D	\$92.1	17,215			D			
		Т						•			osed of, convertib		-	Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date	3A. Deemed Execution Date if any (Month/Day/Ye.	Date,	4. Transaci Code (In		5. Number		6. Date Exerci Expiration Da (Month/Day/Yo		te	7. Title and Amour of Securities Underlying Derivative Security (Instr. 3 and 4)		Derivative Security	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e es ally g	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	Amount or Number of Shares						
Options To Purchase Common Stock	\$39.87	08/06/2019			M			12,000	(2)		03/01/2026	Common Stock	12,000	\$0	15,100)	D		
Sars (Stock Appreciation	\$44.9	08/06/2019			M			1,560	(3)		06/01/2024	Common Stock	1,560	\$0	0		D		

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$92 to \$92.42. 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 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
- 3. 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

08/07/2019

** 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.