FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number:	3235-0287								
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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).

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

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Name and Address of Reporting Person* Garner Todd W.					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		(give title		Other (s	specify		
(Last)	(Fi	3. D	3. Date of Earliest Transaction (Month/Day/Year)									below)			below)						
(Last) (First) (Middle) C/O CONMED CORPORATION							01/04/2021								Executive Vice President & CFO						
11311 CONCEPT BOULEVARD							4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)			- · · · · · · · · · · · · · · · · · · ·								Line)										
LARGO	FI		33773											X Form filed by One Reporting Person							
					-										Form f Persor		e than	One Repo	rting		
(City)	(Si	tate)	(Zip)																		
		Tab	le I - No	n-Deriv	/ative	Sec	curiti	ies Ac	quired	, Dis	posed o	of, or Be	nefici	ally	Owned	i					
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				ay/Year) if		2A. Deemed Execution Date, if any (Month/Day/Year)		3. Transaction Code (Instr. r) 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 4			4 and 5) Securiti Benefic Owned		es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership			
										v	Amount	(A) or (D)	Price		Reporte Transac (Instr. 3	tion(s)			(Instr. 4)		
Common Stock 01/04/2						2021		М		2,000	A	\$(5,		,529		D				
Common Stock 01/04/2					/2021				F		980	D	\$111	.35	4,	,549		D			
		Т	able II -								osed of converti				wned						
1. Title of	2.	3. Transaction	3A. Deem	ad I	4.		E N	umbor	6 Data F	vorois	able and	7. Title an	d	Τ.	Price of	9. Number	of	10.	11. Nature		
1. Iffie or Derivative Security (Instr. 3)	Conversion or Exercise Price of Derivative Security	3. Iransaction Date (Month/Day/Year)	SA. Deem Executior if any (Month/Da	Date,	4. Transaction Code (Instr. 8)		n of		6. Date Exercisa Expiration Date (Month/Day/Yea		9	7. Ittle and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		De Se (In	Price of erivative ecurity estr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly [Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amoun or Numbe of Shares	r							
Rsus (restricted Stock Units)	\$0	01/04/2021			М			2,000	(1)		01/02/2028	Common Stock	2,000		\$0	2,000		D			

Explanation of Responses:

1. Each Restricted Stock Unit ("RSU") represents a contingent right to receive one share of common stock, par value \$0.001 per share of Conmed Corporation (the "Company") and was granted outside of the Company's existing equity plan as "employment inducement grants" under NASDAQ Listing Rule 5635(c)(4) and vest in equal amounts (25%) over a four year period on the January 2 anniversary date of the award, as further described in the Current Report filed with the SEC by the Company on January 2, 2018.

Sarah M. Oliker for Todd W. Garner by Power of Attorney

01/06/2021

** 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.