SEC Form 4
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(Street)

(City)

LARGO

## FORM 4

11311 CONCEPT BOULEVARD

FL

(State)

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

(Check all applicable) Director

Officer (give title

5. Relationship of Reporting Person(s) to Issuer

OMB Number:	3235-0287								
Estimated average burden									
hours per response	: 0.5								

10% Owner

Other (specify below)

	Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. <i>See</i> 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							
	lame and Address of Reporting Personnas Daniel S	n*	2. Issuer Name and Ticker or Trading Symbol <u>CONMED Corp</u> [ CNMD ]	5. Relations (Check all a Dire X Off						
(La	ist) (First) O CONMED CORP	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/31/2021	bel EVI						

33773

(Zip)

	X	(g			
3. Date of Earliest Transaction (Month/Day/Year) 03/31/2021	Λ	below) EVP Legal Affairs	below) s,Gen. Counsel		
4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indi Line)	vidual or Joint/Group F	iling (Check Applicable		
	X	Form filed by One F	Reporting Person		
		Form filed by More t Person	than One Reporting		

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	Transaction Code (Instr.		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11150. 4)		
Common Stock	03/31/2021		A	v	43	A	\$124.06	13,806	D			

	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned         (e.g., puts, calls, warrants, options, convertible securities)														
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		5. Number of		Expiration Date (Month/Day/Year)		and 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

## /s/ Sarah M. Oliker for Daniel 04/02/2021

S. Jonas by Power of 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.