FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Vashington,	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

							(,	,			1 7								
1. Name and Address of Reporting Person* KENNEDY JOHN JED					2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]								Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(Last) (First) (Middle) C/O CONMED CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 03/01/2021								X Officer (give title Other (specify below) Group Executive Vice President						
11311 CONCEPT BOULEVARD					_ 4.	If Ame	endment	, Date o	of Original	Filed	(Month/Day	//Year)		6. Individual or Joint/Group Filing (Check Applicable					
(Street) LARGO												- 1	X Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	(State) (Zip)											Person						
		Tal	ble I - No	n-Der	ivativ	re Se	curitie	es Ac	quired,	Dis	posed of	f, or Ben	eficial	ly Owned					
			Date	2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)		Transaction Disposed (ies Acquired (A) or Of (D) (Instr. 3, 4 and		Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	Amount (A) or (D)		Reported Transact (Instr. 3 a	ion(s)			(Instr. 4)		
Common	Stock			03/0	01/202	21			М		1,250	A	\$0	6,8	359	D			
Common	Stock			03/0	3/01/2021				F		367	D	\$122.	55 6,4	492	D			
Common Stock				03/0	03/01/2021				М		1,250	A	\$0		742	D			
Common Stock			03/0)1/202	/2021		F		367	D	\$122.	55 7,3	375	D					
			Table II -								osed of, convertib			Owned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deeme Execution if any (Month/Day	Date, y/Year) =	4. Transa Code (8)		n Derivative		Expiration	6. Date Exercisa Expiration Date (Month/Day/Year		7. Title and Amount of Securities Underlying Derivative (Instr. 3 and	J Security	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported	Ownershi Form: Direct (D) or Indirect (I) (Instr.	vnership rm: rect (D) Indirect	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Amount or Number of Shares	1	Transactio (Instr. 4)	n(s)			
Rsus (restricted Stock Units)	\$0	03/01/2021			M			1,250	(1)		03/01/2029	Common Stock	1,250	\$0	2,500		D		
Rsus (restricted Stock Units)	\$0	03/01/2021			M			1,250	(1)		03/02/2030	Common Stock	1,250	\$0	3,750		D		
Rsus (restricted Stock Units)	\$0	03/01/2021			A		4,200		(1)		03/01/2031	Common Stock	4,200	\$0	4,200		D		
Options To Purchase Common	\$122.55	03/01/2021			A		8,250		(2)		03/01/2031	Common Stock	8,250	\$0	8,250		D		

Explanation of Responses:

1. Each restricted stock unit ("RSU") represents a contingent right to receive one share of common stock, par value \$0.01 per share of ConMed Corporation (the "Company") and will be subject to the terms and conditions of the Company's 2018 Long-Term Incentive Plan and generally vest in equal amounts (25%) over a four year period.

2. The stock options were granted under the Company's 2018 Long-Term Incentive Plan and generally vest in equal amounts over a five year period

Sarah M. Oliker for John (Jed) Kennedy by Power of Attorney

03/03/2021

** 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.