SEC For	rm 4 FORM				TEC			ודור		<b>२</b> न			~~						
	UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549														OMB APPROVAL				
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					EMENT OF CHANGES IN BENEFICIAL OWNE											COMB Estimation hours			3235-0287 en 0.5
1. Name and Address of Reporting Person*					2. Is										elationship eck all appli		ng Per	rson(s) to Is	suer
,	Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 06/01/2023										X Directo Officer below)	(give title		10% O Other ( below)	
C/O CO	Last) (HISI) (Midd C/O CONMED CORPORATION 11311 CONCEPT BOULEVARD					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicabl Line) X Form filed by One Reporting Person				
(Street) LARGO FL			33773												Form filed by More than One Reporting Person				
(City)	(City) (State) (Zip)					Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a contract, instruction satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.												that is intend	ed to
		Tab	le I - Nor	n-Deriv	vative	Se	curitie	es A	cquired,	Disp	oosed o	of, or B	ene	ficial	ly Owned	d			
1. Title of Security (Instr. 3)				2. Trans Date (Month	saction /Day/Yea	ar)   i	2A. Deemed Execution Date, if any (Month/Day/Year		Code (li	Transaction Code (Instr.		5) Amount (A) or (D)			Benefici Owned	ities ficially d Following		Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership
								Code	v		Price			Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
					1/2023				M		335 A sed of, or Benefici		\$0	- / -			D		
									s, option						Owned				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date ity or Exercise (Month/Day/Year)		Execution Date, if any		4. Transactior Code (Instr 8)		5. Nun of Deriva Securi Acqui (A) or Dispos of (D) (Instr. and 5)	itive ities red sed 3, 4	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Securit (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)	Beneficia Ownershi (Instr. 4)
					Code	v	(A)	(D)	Date Exercisable		xpiration ate	Title	or Ni of	umber					
Rsus (restricted Stock Units)	\$0	06/01/2023			М			335	06/01/2023 <sup>(</sup>	(1) 0	6/01/2032	Common Stock 33		335	\$0	0		D	
Rsus (restricted Stock Units)	\$0	06/01/2023			A	302		06/01/2024 <sup>(</sup>	(1) 0	6/01/2033	Common Stock 30		302	\$0	302		D		
Options To Purchase Common Stock	\$123.79	06/01/2023			Α		2,826		06/01/2024	(2) 0	6/01/2033	Commo Stock	<sup>n</sup> 2	,826	\$0	2,820	6	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 2020 Amended and Restated Non-Employee Director Equity Compensation Plan, with the RSUs generally vesting 100% after a one year period.

2. The stock options were granted under the Company's 2020 Amended and Restated Non-Employee Director Equity Compensation Plan and generally vest 100% after a one year period.

/s/ Daniel S. Jonas for LaVerne	
H. Council by Power of	06/02/2023

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<u>Attorney</u>

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

 $^{\ast}$  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.