FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Name and Address of Reporting Person* Hartman Curt R						2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
(Last)	(First)	(— 3.	3. Date of Earliest Transaction (Month/Day/Year) 03/01/2017									Director Officer (give title below) Presiden		10% Owner Other (specification) at & CEO		specify			
525 FRENCH ROAD					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street) UTICA	NY	1	13502														Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State	e) (Zip)																	
		Tab	le I - N	lon-De	rivativ	ve S	Securitie	es Acc	uired, [Disp	osed	of, c	or Ben	eficially	Owned					
Da				2. Transaction Date (Month/Day/Year)			2A. Deeme Execution if any (Month/Da	3. Transacti Code (Ins 8)		4. Securities Acquired (Disposed Of (D) (Instr. 3 and 5)			3, 4 Securities Beneficial Owned		Form (D) or Indire	: Direct r ect (I)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount		(A) or (D)	Price	Following Reported Transactio (Instr. 3 and	on(s)		str. 4)	(Instr. 4)	
Common Stock					03/01/2017				М		1,950		A	\$ <mark>0</mark>	30,736			D		
Common Stock				03/0	03/01/2017				F		696		D	\$41.93	30,040			D		
Common Stock 03/01/					1/2017	017			M		2,250		A	\$ <mark>0</mark>	32,290		D			
Common Stock 0:					1/2017	:017			F		820 D		D	\$41.93	31,470		D			
			Table				ecurities alls, war							ally Owne s)	ed					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security		any	med on Date, if /Day/Year)	4. Transactic Code (Instr. 8)				6. Date Exe Expiration (Month/Da		7. Title and Amoun Securities Underlyi Derivative Security and 4)		rlying	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficia Owned Following Reported	e Owners Form: Direct (I) or Indirect (I) (Insti	Ownership	Beneficial Ownership (Instr. 4)		
			Code			Date Exercisable		oiration te	N		Amount or Number of Shares		Transaci (Instr. 4)	tion(s)						
Rsus (restricted Stock Units)	\$0	03/01/2017			М	Л		1,950	(1)	02	/27/2025		ommon Stock	1,950	\$0	3,90	00	D		
Rsus (restricted Stock Units)	\$0	03/01/2017			M			2,250	(2)	03	/01/2026		ommon Stock	2,250	\$0 6,750		50	D		
Options To Purchase Common Stock	\$41.93	03/01/2017			A		159,150		(3)	03/	/01/2027		ommon Stock	159,150	\$0	159,1	150	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 2006 Stock Incentive Plan and generally vest in equal amounts (25%) over a four year period.
- 2. 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 2015 Amended and Restated Long-Term Incentive Plan and generally vest in equal amounts (25%) over a four year period.
- 3. The incentive stock options ("ISOs") 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

/s/ Daniel S. Jonas for Curt R. <u>Hartman by Power of Attorney</u> 03/03/2017

** 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.