Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.	C. 20549
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

OMB APPROVAL									
OMB Number: 3235-0287									
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							. ,				Symbol	11340		T _E 5	lalationshir	of Donorti	na Da	roon(o) to la	ouer .	
1. Name and Address of Reporting Person* Cohen Heather L					2. Issuer Name and Ticker or Trading Symbol CONMED CORP COND									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Conen	пеашег	<u> </u>													Direc	tor er (give title		10% Ov Other (s		
(Last)	/Eir	et) (N	Middle)	_	3 Da	te of F	arliest	Trans	action (I	Month	/Dav/Year)				X below			below)	specify	
(Last) (First) (Middle) C/O CONMED CORPORATION					3. Date of Earliest Transaction (Month/Day/Year) 03/31/2020									EVP CORP HR						
525 FRENCH ROAD					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable							
(Street)							,		- 3			,	,	Line))					
UTICA	NY	7 1	3502											-		•		porting Pers		
															Form Perso		ore tha	an One Rep	orting	
(City)	(St	ate) (Z	Zip)																	
		Table	I - Non-De	rivati	ive S	Secu	rities	Acq	uired	, Dis	posed of	, or E	Bene	ficia	lly Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da					Execut ay/Year) if any		Deemed ecution Date, ny onth/Day/Year)		Transaction Disposed O Code (Instr. 5)			ies Acquired (A Of (D) (Instr. 3,		A) or 3, 4 and	Securit Benefic	5. Amount of Securities Beneficially Owned Following		m: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or P	rice Transa		action(s) 3 and 4)			(Instr. 4)	
Common Stock 03/31/2				/31/20	/2020				A	V	224	A	. [\$54.4	1 17,390			D		
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																			
			(e.g.	, put	s, ca	ılls, ı	varra	ants,	optio	ns, c	convertib	le se	curit	ties)						
1. Title of Derivative Security (Instr. 3)	vative Conversion Date Execution Date, Inity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of Deriv Secu Acqu (A) o Dispo	r osed) r. 3, 4	Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)			3. Price of Derivative Security (Instr. 5)	derivative Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amo or Num of Shar	nber						

Explanation of Responses:

/s/ Sarah M. Oliker for 04/02/2020 Heather Cohen by Power of <u>Attorney</u>

** 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.