Edgar Filing: CONMED CORP - Form 4

CONMED CORP

CONMED C Form 4	CORP									
January 26, 2	_									
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMIS						OMMISSION				
			shington,					OMB Number:	3235-0287	
Check th if no long subject to Section 1 Form 4 o	ger 5 STATEMEN 6. r	STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES							January 31, 2005 verage rs per 0.5	
Form 4 or Form 5 obligations may continue. See Instruction 1(b). Form 5 obligations may continue. See Instruction Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940										
(Print or Type I	Responses)									
1. Name and A Hartman Cu	Symbol	2. Issuer Name and Ticker or Trading Symbol CONMED CORP [CNMD]				5. Relationship of Reporting Person(s) to Issuer				
(Last)	(First) (Midd	le) 3. Date of	3. Date of Earliest Transaction				(Chec.	Check all applicable)		
C/O CONM FRENCH R		(Month/Day/Year) 01/23/2015				Director 10% Owner X Officer (give title Other (specify below) below) President & CEO				
			nendment, Date Original Ionth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line) _X_ Form filed by One Reporting Person			
UTICA, NY	7 13502						Form filed by M Person	lore than One Re	porting	
(City)	(State) (Zip) Tab	le I - Non-D	erivative	Secur	ities Acq	uired, Disposed of	, or Beneficial	ly Owned	
1.Title of Security (Instr. 3)	ar	e 2A. Deemed 3. 4. Securities Acquired Execution Date, if Transaction(A) or Disposed of (D) any Code (Instr. 3, 4 and 5) (Month/Day/Year) (Instr. 8) (A) or		d of (D)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)				
G			Code V	Amount		Price	(Instr. 3 and 4)			
Common Stock	01/23/2015		М	2,708	Α	\$0	20,535	D		
Common Stock	01/23/2015		F	1,357	D	\$ 47.27	19,178	D		

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

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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. Transacti Code (Instr. 8)	5. Number onof Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)		8. Pr Deriv Secu (Inst
				Code V	(A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	
Rsus (restricted Stock Units)	\$ 0	01/23/2015		М	2,708	<u>(1)</u>	<u>(1)</u>	Common Stock	2,708	\$

Reporting Owners

Reporting Owner Name / Address	Relationships							
L O	Director	10% Owner	Officer	Other				
Hartman Curt R C/O CONMED CORP 525 FRENCH ROAD UTICA, NY 13502			President & C	CEO				
Signatures								
/s/ Daniel S. Jonas for Curt R. Attorney	01/26/2015							

**Signature of Reporting Person

Explanation of Responses:

- * 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).

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 is subject to the terms and conditions of the Company's 2006 Stock Incentive Plan. Under the

Date

(1) terms of Mr. Hartman's offer letter, dated July 22, 2014, in connection with his appointment as Interim CEO, the total number of RSUs granted will vest in 1/12 increments for each month he is employed as Interim CEO, provided that any such RSUs that remain unvested at the end of his employment as Interim CEO will be forfeited.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.