

ABRAHAM WILLIAM  
Form 4  
March 04, 2010

**FORM 4**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
Washington, D.C. 20549**

OMB APPROVAL

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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 OF SECURITIES**

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 Responses)

1. Name and Address of Reporting Person \*  
**ABRAHAM WILLIAM**

(Last) (First) (Middle)

**C/O CONMED CORP, 525  
FRENCH ROAD**

(Street)

**UTICA, NY 13502**

(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol  
**CONMED CORP [CNMD]**

3. Date of Earliest Transaction  
(Month/Day/Year)  
**03/02/2010**

4. If Amendment, Date Original Filed(Month/Day/Year)

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

\_\_\_\_ Director \_\_\_\_\_ 10% Owner  
 Officer (give title below) \_\_\_\_\_ Other (specify below)  
**Senior Vice President**

6. Individual or Joint/Group Filing(Check Applicable Line)  
 Form filed by One Reporting Person  
 Form filed by More than One Reporting Person

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Ownership (Instr. 4)
				(A) or (D) Code V Amount Price			
Common Stock	03/02/2010		M	1,415 A \$ 16.42	37,306	I	Spouse
Common Stock	03/02/2010		M	7,501 A \$ 9.17	44,807	I	Spouse
Common Stock	03/02/2010		F	4,132 D \$ 22.27	40,675	I	Spouse
Common Stock					14,808	D	

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

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(9-02)

**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. Transaction Code (Instr. 8)	5. Number of 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)
				Code	V (A) (D)	Date Exercisable Expiration Date	Title Amount or Number of Shares
Options To Purchase Common Stock	\$ 16.42	03/02/2010		G	V 1,415	(1) 05/16/2010	Common Stock 1,415
Options To Purchase Common Stock	\$ 16.42	03/02/2010		G	V 1,415	(1) 05/16/2010	Common Stock 1,415
Options To Purchase Common Stock	\$ 9.17	03/02/2010		G	V 7,501	(2) 10/11/2010	Common Stock 7,501
Options To Purchase Common Stock	\$ 9.17	03/02/2010		G	V 7,501	(2) 10/11/2010	Common Stock 7,501
Options To Purchase Common Stock	\$ 16.42	03/02/2010		M	1,415	(1) 05/16/2010	Common Stock 1,415
Options To Purchase Common Stock	\$ 9.17	03/02/2010		M	7,501	(2) 10/11/2010	Common Stock 7,501

Stock

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
ABRAHAM WILLIAM C/O CONMED CORP 525 FRENCH ROAD UTICA, NY 13502			Senior Vice President	

## Signatures

Daniel S. Jonas for William Abraham by Power of Attorney 03/04/2010

\_\_Signature of Reporting Person

Date

## 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).
- (1) 5 year vesting schedule, 20% vest each year starting 5/16/2001
- (2) 5 year vesting schedule, 20% vest each year starting 10/11/2001

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.