FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D C	20540
wasnington,	D.C.	20049

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	OMB APPROVAL									
OMB Number:	3235-0287									
Estimated average burden										
hours per response	: 0.5									

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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

											_			_				_			
1. Name and Address of Reporting Person* <u>Carley Brian T</u>				2. Issuer Name and Ticker or Trading Symbol Medpace Holdings, Inc. [MEDP]											Relationship eck all app X Direct	,		son(s) to Iss			
(Last)	(F	irst) ((Middle)			3. Date of Earliest Transaction (Month/Day/Year) 11/30/2023									Office below	r (give title		Other (s below)	pecify		
C/O MEI	DPACE HO	OLDINGS, INC.			4. If	Amen	dment	t. Date	of O	Original F	iled	(Month/D	av/Yea	ır)	6. 1	ndividual or	Joint/Grou	p Filin	a (Check Ap	plicable	
5375 MEDPACE WAY					4. If Amendment, Date of Original Filed (Month/Day/Year)										Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person						
(Street)	NATI O	11	45227													Form Perso		re tha	n One Repo	rting	
CINCINI	NAII U	H 4	45227		<u></u>	ulo 1	0h5	1/0	\ T	rance	ooti	on Inc	diooti	ion							
(City)	(9	tata)	(Zin)			Rule 10b5-1(c) Transaction Indication															
(City) (State) (Zip)					Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.																
		Tabl	e I - Non-	-Deriv	ative	Sec	uritie	es Ac	qui	ired, [Disp	osed o	of, or	Ben	eficial	ly Owne	d				
1. Title of Security (Instr. 3) 2. Transar Date (Month/Da					Execution Date			Code (Instr.		4. Securities Acquired (A Disposed Of (D) (Instr. 3, 5)			Benefic Owned	es ially Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership				
								-	Code	v			A) or D)	Price	Reporte Transac (Instr. 3	tion(s)			Instr. 4)		
Common Stock																7	,710		D		
	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		Exp	Date Exe piration I onth/Day	Date		7. Title and Amount of Securities Underlying Derivative Secu (Instr. 3 and 4)			8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exe	e ercisable		opiration	Title	0 N 0	lumber						
Restricted Stock Unit	(1)	11/30/2023			A		313			(2)		(2)	Comm		313	\$270.72	313		D		

Explanation of Responses:

- 1. Each restricted stock unit represents a contingent right to receive one share of MEDP common stock.
- $2. The \ restricted \ stock \ units \ vest \ in \ four \ approximately \ equal \ installments \ on \ March \ 31, 2024, \ June \ 30, 2024, \ September \ 30, 2024, \ and \ December \ 31, 2024.$

/s/ Stephen P. Ewald as

Attorney-in-Fact for Brian T. 12/04/2023

<u>Carley</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.