Instruction 1(b).

FORM 4

Check this box if no longer subject

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

to Section 16. Form 4 or Form 5 obligations may continue. See 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*  Medpace Investors, LLC					2. Issuer Name and Ticker or Trading Symbol  Medpace Holdings, Inc. [ MEDP ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director X 10% Owner						
(Last)	(Fi	,	Middle	e)		3. Date of Earliest Transaction (Month/Day/Year) 09/18/2023									Office	er (give title v)		Other ( below)	(specify	
C/O MEDPACE HOLDINGS, INC. 5375 MEDPACE WAY					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person							
(Street)	rreet) INCINNATI OH 45227														Form filed by More than One Reporting Person					
(City)	(City) (State) (Zip)				Rule 10b5-1(c) Transaction Indication  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.															
		Table	I - N	lon-Deriva	tive S	Secur	rities	Ac	quire	ed, Di	sposed of	f, or E	Benefici	ally	Own	ed				
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				ear) i	Execution		n Date,		action (Instr.	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			and 5) Secui Bene		cially I Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or (D)	Price	Tran		action(s) 3 and 4)			(Instr. 4)	
Common Stock 09/18/20					.3				S <sup>(1)</sup>		53,385	D	\$274.7	6 <sup>(2)</sup>	6,179,634		D			
Common Stock 09/19/202					.3				S <sup>(1)</sup>		137,379	D	\$259.6	9.66 <sup>(3)</sup>		6,042,255		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)	Exec if an	Deemed cution Date, y tth/Day/Year)	4. Transa Code ( 8)	(Instr.	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Expiration Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)  Amount or Number of Title Shares		8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership (Instr. 4)	

## **Explanation of Responses:**

- 1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on May 1, 2023.
- 2. The reported price is a weighted average price. These shares were sold in multiple transactions ranging from \$271.505 to \$278.665. The Reporting Person undertakes to provide full pricing information to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission upon request.
- 3. The reported price is a weighted average price. These shares were sold in multiple transactions ranging from \$254.74 to \$271.42. The Reporting Person undertakes to provide full pricing information to the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission upon request.

/s/ Stephen P. Ewald,

Authorized Signatory for

Medpace Investors, LLC

\*\* Signature of Reporting Person Date

09/20/2023

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.