Instruction 1(b).

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
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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											
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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]										all app	tor	ng Pe	(10% O	wner	
(Last) (First) (Middle) C/O MEDPACE HOLDINGS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 09/14/2022									Officer (give tit below)			Other (below)	specify
5375 MEDPACE WAY (Street)					4. If a	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					
	CINCINNATI OH 45227													Form filed by More than One Reporting Person					
(City)	(S	tate) (Ž	Zip)																
		Table	I - N	on-Deriva	tive	Secui	rities	Ac	quire	d, Di	sposed o	f, or E	enefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye					Year)	Execution Dat		Code (Instr.		action	4. Securities Acquired (A) o Disposed Of (D) (Instr. 3, 4 a			and 5) Secur Benet		rities F ficially (led Following (l		wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
									Code	v	Amount	(A) or (D)	Price	Trai		action(s) . 3 and 4)			(111511. 4)
Common Stock 09/14/202						.2			P ⁽¹⁾		62,516	A	\$152.0	.66 ⁽²⁾ 6,0		,018,204		D	
Common Stock 09/15/202				22			P (1)		62,516 A \$15		\$153.	11(3)	6,080,720		Z20 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 any	Deemed ution Date, y tth/Day/Year)	4. Transa Code 8)					Expiration Date (Month/Day/Year)			e and nt of ities lying ative ity (Instr. 4)	Der Sec (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exer	cisable	Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. The purchases reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by the Reporting Person on March 17, 2022, as amended on May 3, 2022 and August 15, 2022.
- 2. The reported price is a weighted average price. These shares were purchased in multiple transactions ranging from \$149.49 to \$155.34. 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 purchased in multiple transactions ranging from \$150.94 to \$155.51. 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

09/16/2022

** 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.