SEC Form 4	
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## FORM 4

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

			-			APPROVAL				
		tt STATEN	Filed pursuant to Section 16(a) of the Securities Exchange Act of 193- or Section 30(h) of the Investment Company Act of 1940	OMB Number: Estimated ave hours per resp	rage burden					
1. Name and Addro Troendle Au	1 0	Person <sup>*</sup>	2. Issuer Name <b>and</b> Ticker or Trading Symbol <u>Medpace Holdings</u> , Inc. [MEDP]	5. Relationship of (Check all applica X Director	ble) X	10% Owner				
(Last) C/O MEDPAC	(First) E HOLDINGS	(Middle) S, INC.	3. Date of Earliest Transaction (Month/Day/Year) 11/21/2023	X Officer (g below)	CEO	Other (specify below)				
5375 MEDPACE WAY			4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Individual or Joint/Group Filing (Check Applicab Line)						
(Street) CINCINNATI	ОН	45227			d by One Repor d by More than	0				
(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 - Non-De	erivative Securities Acquired, Disposed of, or Bene	ficially Owned						

1. Title of Security (Instr. 3)		2. Transaction Date (Month/Day/Y	ear) if any	med on Date, Day/Year)	3. Transa Code ( 8)		4. Securities Disposed Of	ed (A) or tr. 3, 4 and 5)	Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
							v	Amount	(A) or (D)	Price	Transa (Instr. 3	ction(s)		(Instr. 4)
Common	Stock		11/21/202	3		S <sup>(1)</sup>		25,000	D	\$277.37	2) 5,7]	14,947	Ι	By Medpace Investors, LLC <sup>(3)</sup>
Common	Stock										80	6,643	D	
		Tat	ole II - Derivati (e.g., pu					sposed of , converti			y Owne	d		
1. Title of Derivative Security (Instr. 3)	ve Conversion Date Execution Date, Transaction of Or Exercise (Month/Day/Year) Price of Price of Or Exercise (Month/Day/Year) 8) Securit		5. Number of Derivative Securities Acquired	Expiratio (Month/D		e Exercisable and ation Date h/Day/Year)		unt of rities	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned	Ownershi Form:	Beneficial Ownershi		

(Instr. 3	(monunday) (sar)	(Month/Day/Year)	8)		Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		ui)	Underlying Derivative Security (Instr. 3 and 4)		(Instr. 5)	Beneficially Owned Following Reported Transaction(s) (Instr. 4)	Direct (D) or Indirect (I) (Instr. 4)	Ownership (Instr. 4)		
			Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares					

Explanation of Responses:

1. The transactions reported on this Form 4 were effected pursuant to a limit order placed by Medpace Investors, LLC ("MPI") during an open window period.

2. The reported price is a weighted average price. These shares were sold in multiple transactions ranging from \$275.67 to \$279.49. 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 Reporting Person is the sole manager and controlling unit holder of MPI and has sole voting and investment control with respect to the securities held by MPI. The Reporting Person may be deemed to indirectly beneficially own the securities of the Issuer held by MPI but disclaims beneficial ownership of such securities except to the extent of his pecuniary interest therein.

> /s/ Stephen P. Ewald, Attorney-in-Fact for August J. 11/22/2023 Troendle

\*\* 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.