FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C. 20549
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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(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
ON	OMB Number: 3235-0287								
Est	Estimated average burden								
hou	urs per response:	0.5							

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

Name and Address of Reporting Person* Troendle August J.				2. Issuer Name and Ticker or Trading Symbol Medpace Holdings, Inc. [MEDP]									k all app Direc	tor	X	(10% (Owner		
	Last) (First) (Middle) C/O MEDPACE HOLDINGS, INC. 5375 MEDPACE WAY				3. Date of Earliest Transaction (Month/Day/Year) 08/23/2021								X		Officer (give title below)		below	(specify)	
(Street) CINCINNATI OH 45227			4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									dividual or Joint/Group Filing (Check Applicable) K Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)			(Zip)	Jon Dovins	41140	Caarre	ition A		ا امما	Dian.		£ 04 5) Domof	المنمنا	. 0				
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			2A. Deemed Execution Date,		3. Transaction Code (Instr. 8)		4. S	4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Followin		unt of ies cially Following			7. Nature of Indirect Beneficial Ownership (Instr. 4)			
							Cod	Code V		ount	(A) or (D)	(A) or (D) Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(IIISII. 4)	
Common	Stock			08/23/202	!1			S ⁽¹)	1,4	482 ⁽¹⁾	D	\$180	.22 ⁽²⁾	6,04	18,997		I	By Medpace Investors, LLC ⁽³⁾
Common Stock			08/24/202	21			S ⁽¹)	1,8	1,814 ⁽¹⁾ D \$180		\$180	.06(4)	6,047,183			I	By Medpace Investors, LLC ⁽³⁾	
Common	Stock														700	6,643		D	
		Ta	able	II - Derivati (e.g., pu											Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercis Price of Derivative Security		Exe if ar	Deemed cution Date,	4. Trans	saction (Instr.	5. Numb of Derivativ Securitie Acquired (A) or Dispose of (D) (Instr. 3, and 5)	er 6. E/e (Mes	r 6. Date Exc Expiration (Month/Da		ercisable and Date		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactic (Instr. 4)	Owner Form: Direct or Indi (I) (Insi	Ownershi	Beneficial Ownership (Instr. 4)
					Code	v	(A) (D		ate xercisal		Expiration Date	Title	Amou or Numb of Share	er					

Explanation of Responses:

- 1. The sales reported on this Form 4 were effected pursuant to a Rule 10b5-1 trading plan adopted by Medpace Investors, LLC ("MPI") on March 12, 2021.
- 2. The reported price is a weighted average price. These shares were sold in multiple transactions ranging from \$180.00 to \$180.94. 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.
- 4. The reported price is a weighted average price. These shares were sold in multiple transactions ranging from \$180.00 to \$180.37. 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, Attorney-in-Fact for August J. 08/25/2021 **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.