FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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 Instruction 1(b).

1. Name and Address of Reporting Person* <u>Troendle August J.</u>						2. Issuer Name and Ticker or Trading Symbol Medpace Holdings, Inc. [MEDP]									k all app Direc	tor	X	10% C)wner
	(Last) (First) (Middle) C/O MEDPACE HOLDINGS, INC. 5375 MEDPACE WAY				3. Date of Earliest Transaction (Month/Day/Year) 07/12/2021								X	X Officer (give title below) President & C				(specify	
(Street) CINCINNATI OH 45227				4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	·				son	
(City)	(State)	(Zip)												_				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yes					ar) if	2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an				5. Amount of		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership (Instr. 4)
								Cod	de	v /	Amount	(A) or (D)	Price		Transaction(s) (Instr. 3 and 4)		. 4) ((111511.4)	
Common Stock 07/12/202					1			S ⁽⁾	1)		10,540 ⁽¹⁾	D	\$183	.22 ⁽²⁾	6,189,188		I		By Medpace Investors, LLC ⁽³⁾
Common Stock 07/13/20				07/13/202	1			S	S ⁽¹⁾		13,050(1)	D	\$182.96 ⁽⁴⁾		6,176,138		I		By Medpace Investors, LLC ⁽³⁾
Common Stock														706,643		D			
			Table	II - Derivati (e.g., pu							posed of, convertil				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversic or Exercis Price of Derivative Security	e (Month/Day/Ye	ear) Exe	. Deemed ecution Date,	4. Transa Code (8)	action	5. Nur of Deriva Secur Acqui (A) or Dispo of (D) (Instr. and 5)	nber ative ities red sed 3, 4	6. Da Expir (Mon		rcisable and Date /Year)	7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		8. F Der Ser (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	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 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 \$180.715 to \$184.76. 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 \$181.325 to \$184.59. 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. 07/14/2021 **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.