FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

<b>STATEMENT</b>	OF CHANGES	S IN BENEFICIAL	<b>OWNERSHIP</b>

OMB APPROVAL											
OMB Number: 3235-028											
Estimated average burden											
hours per response:	0.5										
	OMB Number: Estimated average burd										

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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*     Medpace Investors, LLC				2. Issuer Name and Ticker or Trading Symbol  Medpace Holdings, Inc. [ MEDP ]									all app Direc	tor	ng Per X	10% O	wner			
(Last) C/O ME	(Fi	est) (N OLDINGS, INC.	Middle	e)		3. Date of Earliest Transaction (Month/Day/Year) 07/16/2021								below	er (give title		Other ( below)	specify		
5375 MEDPACE WAY					4. If	If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable						
(Street)	NATI OI	Н 4	5227	7									X Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City)	(St	ate) (Z	Zip)																	
		Table	I - N	Non-Deriva	tive	Secui	rities	Ac	quire	ed, Di	sposed o	f, or E	Benefic	ially	Own	ed				
Date			2. Transaction Date (Month/Day/Y	ear) i	Execution Date,		7	3. Transaction Code (Instr. 8)		4. Securities A Disposed Of (	Acquired (A) or (D) (Instr. 3, 4 ar		nd 5) Securi Benefi		ities Folicially (D		n: Direct or Indirect ostr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) or (D)	Price		Transa	Transaction(s) (Instr. 3 and 4)			(msu. 4)	
Common Stock 07/16/202			21	1			S <sup>(1)</sup>		12,454(1)	D	\$182.	.83(2) 6		6,138,961		D				
Common	Stock			07/19/202	21				S <sup>(1)</sup>		1,442(1)	D	\$181.	11 <sup>(3)</sup>	6,137,519		) 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)	Exe if an	Deemed cution Date, ly nth/Day/Year)	4. Transaction Code (Instr. 8) Securitie Acquirec (A) or Dispose of (D) (Instr. 3, and 5)		tive ties ed sed	Expi	ate Exe iration I nth/Day		7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)				ative derivative ity Securities		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
Fundamentia					Code	v	(A)	(D)	Date Exe	e rcisable	Expiration Date	Title	Amount or Number of Shares							

## 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 March 12, 2021.
- 2. The reported price is a weighted average price. These shares were sold in multiple transactions ranging from \$180.605 to \$184.48. 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 \$180.00 to \$182.235. 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

07/20/2021

\*\* 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.