Instruction 1(b).

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APP	OMB APPROVAL											
OMB Number:	3235-0287											
Estimated average burden												
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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* Troendle August J.						2. Issuer Name and Ticker or Trading Symbol Medpace Holdings, Inc. [MEDP]								Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner Officer (give title) Check (specify)					
	(Last) (First) (Middle) C/O MEDPACE HOLDINGS, INC. 5375 MEDPACE WAY						3. Date of Earliest Transaction (Month/Day/Year) 01/08/2021							X Officer (give title Other (specify below) President & CEO					
(Street) CINCINNA	(Street) CINCINNATI OH 45227				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	te) (2	Zip)																
		Table	I - N	Non-Deriva	tive	Secui	rities	Acq	uire	ed, D	isposed o	of, or E	Benefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea				ar) E	2A. Deemed Execution Date, if any (Month/Day/Year)		Co	Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benefic Owned		ies cially Following	Forn (D) c Indir	ect (I)	7. Nature of Indirect Beneficial Ownership	
								Co	ode	v	Amount	(A) or (D)	Price			ted (Instr. 4 action(s) 3 and 4)		r. 4)	(Instr. 4)
Common Stock 01/08/20				01/08/202	1	ı		S	S ⁽¹⁾		26,666(1)	D	\$140.7	\$140.71 ⁽²⁾		6,457,202		I	By Medpace Investors, LLC ⁽³⁾
Common Stock														706,643		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																			
Security or (Instr. 3) Pr	ive Conversion Date y or Exercise (Month/Day/Year) Execution Date, if any			action (Instr.	5. Num of Deriva Securi Acquii (A) or Dispo of (D) (Instr. and 5)	itive ities red sed 3, 4	Expiration Date		Amou Secu Unde Deriv Secu 3 and	rlying ative rity (Instr.	Derivative Security (Instr. 5)		9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownershi 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 December 3, 2020.
- 2. The reported price is a weighted average price. These shares were sold in multiple transactions ranging from \$140.00 to \$142.29. 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. 01/11/2021 **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.