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(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 Estimated average burden hours 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* Medpace Investors, LLC | | | | | | 2. Issuer Name and Ticker or Trading Symbol Medpace Holdings, Inc. [MEDP] | | | | | | | | | all app | tor | ng Pe X | (10% O | wner |
|--|--|--|---------------------------------------|---|------------------------------|---|---|---|------------------|--|---------------|------------------------|--|---|---|---|--|--|--|
| | C/O MEDPACE HOLDINGS, INC. | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/23/2021 | | | | | | | | | Officer (give title below) | | Other below | | specify |
| 5375 MEDPACE WAY | | | | | 4. If / | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | |
| (Street) CINCINNATI OH 45227 | | | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | (St | ate) (ž | Zip) | | | | | | | | | | | | | | | | |
| | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned | | | | | | | | | | | | | | | | | | |
| Date | | | 2. Transactio Date (Month/Day/\ | Executi (ear) if any | | emed ion Date, /Day/Year) | | 3. Transaction Code (Instr. 8) | | | | | and 5) Secur Benet | | rities F ficially (I ed Following (I | | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | | Transaction(s) (Instr. 3 and 4) | | | | (111501.4) | |
| Common Stock 08/23 | | | | | 21 | | | | S ⁽¹⁾ | | 1,482(1) | D | \$180.2 | 22 ⁽²⁾ | 6,048,997 | | | D | |
| Common | Common Stock 08/24/ | | | | 21 | | | S ⁽¹⁾ | | 1,814(1) | D | \$180.0 | <mark>06⁽³⁾</mark> | 6,047,183 | | 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) | Exec if any | Deemed vution Date, y y tth/Day/Year) | 4. Transa Code (8) | | of Deriv Secu Acqu (A) o Dispo | r osed) r. 3, 4 | Expi (Moi | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | e and nt of ities lying ative ity (Instr. 4) Amount | Der Sec (Ins | Price of rivative curity str. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Owi Fori Dire or li (I) (I | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) |
| | | | | | Code | code V (A) (D) | | Date Exe | e rcisable | Expiration Date | Title | 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 \$180.00 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 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, **Authorized Signatory for** Medpace Investors, LLC

08/25/2021

** 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.