FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Machinatan  | D C  | 20540 |  |
|-------------|------|-------|--|
| Nashington, | D.C. | 20049 |  |

| 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             |           |  |  |  |  |  |  |  |
|--------------------------|-----------|--|--|--|--|--|--|--|
| OMB Number:              | 3235-0287 |  |  |  |  |  |  |  |
| Estimated average burden |           |  |  |  |  |  |  |  |
| hours per respo          | onse: 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

| 1  | nd Address of<br>le Augus  | Reporting Person     | *     |   |  |  |                         |   |                  |  | ng Symbol                       |  |  |  | all app<br>Direc                                | tor        | <u>y</u>                              | <b>₹</b> 10% C                                      | Owner   |  |
|--|--|----------------------|-------|---|--|--|-------------------------|---|------------------|--|---------------------------------|--|--|--|---|------------|---------------------------------------|---|---|--|
| (Last)   | (Fi<br>DPACE HO  | rst)<br>OLDINGS, INC | (Midd | le)   | 3. Date of Earliest Transaction (Month/Day/Year) 02/23/2024  |  |                         |   |                  |  |                                 |  |  | X Officer (give title below) Other (specify below)  CEO  |   |            |                                       |   |   |  |
| 5375 ME  | EDPACE W   | 'AY                  |       |   | 4. If  | 4. If Amendment, Date of Original Filed (Month/Day/Year) |                         |   |                  |  |                                 |  |  | 6. Individual or Joint/Group Filing (Check Applicable Line)  |   |            |                                       |   |   |  |
| (Street)   | NATI OI  | H ·                  | 4522  | 7   |  |  |                         |   |                  |  |                                 |  |  | X Form filed by One Reporting Person Form filed by More than One Reporting Person                                  |   |            |                                       |   |   |  |
| (City)   | (St  | ate)                 | (Zip) |   | Rı   | ule 10   | )b5-                    | 1(c)                                    | ) Tra            | ansa   | ction Inc                       | licati   | on   |  |   |            |                                       |   |   |  |
|  |  |                      |       |   | Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10. |  |                         |   |                  |  |                                 |  |  |  |   | ended to   |                                       |   |   |  |
|  | Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned   |                      |       |   |  |  |                         |   |                  |  |                                 |  |  |  |   |            |                                       |   |   |  |
| 1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye |  |                      | Date  | Execution (ar)  |  |  |                         | 3.<br>Transaction<br>Code (Instr.<br>8) |                  | 4. Securities Acquired (A) or<br>Disposed Of (D) (Instr. 3, 4 ar |                                 |  | nd 5) Securities<br>Beneficially<br>Owned Followin |  | ies<br>:ially<br>Following                      |            |                                       | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership |   |  |
|  |  |                      |       |   | G  | Code V   |                         | Amount                                  | (A) or<br>(D)    |  |                                 | Reported<br>Transaction(s)<br>(Instr. 3 and 4) |  | (Inst  | r. 4)   | (Instr. 4) |                                       |   |   |  |
| Common   | Stock  |                      |       | 02/23/202   | 4  |  |                         |   | S <sup>(1)</sup> |  | 100,000                         | D  | \$400.32   | 2(2)   | 5,28  | 39,947     |                                       | I   | By<br>Medpace<br>Investors,<br>LLC <sup>(3)</sup> |  |
| Common   | Stock  |                      |       | 02/26/202   | 4  |  |                         |   | S <sup>(1)</sup> |  | 56,928                          | D  | \$402.38   | 3(4) 5,2.  |   | 5,233,019  |                                       | 1   | By<br>Medpace<br>Investors,<br>LLC <sup>(3)</sup> |  |
| Common   | Stock  |                      |       |   |  |  |                         |   |                  |  |                                 |  |  |  | 806,643   |            |                                       | D   |   |  |
|  | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities) |                      |       |   |  |  |                         |   |                  |  |                                 |  |  |  |   |            |                                       |   |   |  |
| 1. Title of<br>Derivative<br>Security<br>(Instr. 3)                | Derivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any   |                      |       | 4. Transaction Code (Instr. 8) Severitie Acquirer (A) or Dispose of (D) (Instr. 3, and 5) |  | ative<br>rities<br>ired<br>osed                          | Expiration<br>(Month/Da |   |                  | Amor<br>Secu<br>Unde<br>Deriv                                    | rlying<br>ative<br>rity (Instr. | Der<br>Sec                                     | Price of<br>ivative<br>surity<br>str. 5)           | 9. Number<br>derivative<br>Securities<br>Beneficiall<br>Owned<br>Following<br>Reported<br>Transactio<br>(Instr. 4) | Owner<br>Form:<br>Direct<br>or Indi<br>(I) (Ins | Ownership  | Beneficial<br>Ownership<br>(Instr. 4) |   |   |  |
|  |  |                      |       |   | Code   | Date Expiration of                                       |                         |   |                  |  | Number                          |  |  |  |   |            |                                       |   |   |  |

## **Explanation of Responses:**

- 1. The transactions reported on this Form 4 were effected pursuant to a limit order placed by Medpace Investors, LLC ("MPI") during an open window period.
- 2. The reported price is a weighted average price. These shares were sold in multiple transactions ranging from \$396.15 to \$402.50. 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 \$397.98 to \$405.72. 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.

## Remarks:

/s/ Stephen P. Ewald, Attorney-in-Fact for August J. 02/27/2024 **Troendle** 

\*\* Signature of Reporting Person

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.