SEC Form 4	
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## FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

)	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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPR	ROVAL
OMB Number:	3235-0287
Estimated average bu	irden
hours por rosponso:	0.5

1. Name and Addre	1 0	erson*	2. Issuer Name <b>and</b> Ticker or Trading Symbol Medpace Holdings, Inc. [MEDP]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)					
Troendle Aug	<u>gust J.</u>					10% Owner			
(Last) (First) (Middle)			3. Date of Earliest Transaction (Month/Day/Year)	- x	Officer (give title below)		Other (specify below)		
C/O MEDPACE	· · /		09/28/2018	President & CEO		EO			
5375 MEDPAC	E WAY								
(Street) CINCINNATI	ОН	45227	<ul> <li>4. If Amendment, Date of Original Filed (Month/Day/Year) 10/01/2018</li> </ul>	6. Indiv Line) X	vidual or Joint/Group Form filed by One Form filed by Mor	Repor	ting Person		
(City)	(State)	(Zip)	—		Person		one reporting		

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

Table 1- Non-Derivative Securities Acquired, Disposed 01, 01 Derienciary Owned										
1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)						5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(11150.4)
Common Stock	09/28/2018		J <sup>(1)</sup>		744,385 <sup>(2)</sup>	D	\$59.91	8,151,125	Ι	By Medpace Investors, LLC <sup>(3)</sup>
Common Stock								603,702	D	
Common Stock								10,000	Ι	By son

## Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

L	(c.g., puis, 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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of I		6. Date Exerc Expiration Da (Month/Day/\	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents distributions of MEDP shares in-kind to the holders of Medpace Investors, LLC's ("MPI") Incentive Units.

2. Second amendment to Form 4 filing dated October 1, 2018 to report adjusted amount of shares distributed.

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 shares 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-10/11/2018

in-Fact for August J. 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.