SEC For	m 4 FORM	4	UNITE	) STA	TES	s se	ECUR	ITIE	S AN	DE	ЕХСНА	NGE C	омм	ISSION				
					Washington, D.C. 20549											OMB APPROVAL		/AL
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).					ed pur	suant	to Sectior	16(a	) of the Se	ecurit	NEFICI.					verage burder	3235-0287 n 0.5	
1. Name and Address of Reporting Person* Elder Scot Michael					T	2. Issuer Name and Ticker or Trading Symbol <u>TREACE MEDICAL CONCEPTS, INC.</u> [ TMCI ]								neck all applie Directo	cable) or (give title	, 10% Own		ner
(Last)(First)(Middle)C/O TREACE MEDICAL CONCEPTS, INC.203 FT WADE ROAD SUITE 150					3. Date of Earliest Transaction (Month/Day/Year) 10/01/2022 *See "Remarks"													
(Street) PONTE VEDRA FL 32081 (City) (State) (Zip)					4.1	<ul> <li>4. If Amendment, Date of Original Filed (Month/Day/Year)</li> <li>6. Individual or Joint/Group Filing (Check Applic Line)</li> <li>X Form filed by One Reporting Person</li> <li>Form filed by More than One Reporting Person</li> </ul>											n	
(City)	(S	tate)																
		Tab	le I - Nor	n-Deriv	ativ	e Se	curities	s Ac	quired,	Dis	posed o	of, or Be	neficia	ly Owned				
1. Title of Security (Instr. 3) 2. Transa Date (Month/E					ear)	2A. Deemed Execution Date, if any (Month/Day/Year)		Code		1 Disposed	ties Acquire I Of (D) (Ins (A) o (D)	tr. 3, 4 an	d Securitie Benefici Owned F Reporte Transact	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)		r Indirect Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
Common Stock 10/0				10/01	1/202	2			Α	$\square$	6,600	6,600 <sup>(1)</sup> A		0 19,4	19,475 <sup>(2)</sup>		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)	3A. Deeme Execution if any (Month/Day	Date,	I. Transaction Code (Instr. 3)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date E: Expiratio (Month/D	n Dat	e	7. Title and Am of Securities Underlying Derivative Secu (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Numbe derivative Securities Beneficia Owned Following Reported Transacti (Instr. 4)	s Ily I	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	(A)	(D)	Date Exercisat		Expiration Date	Title	Amount or Number of Shares					
Stock Option (Right to Buy)	\$22.07	10/01/2022			Α		47,000		(3)		10/01/2032	Common Stock	47,000	\$0.00	47,00	0	D	

Explanation of Responses:

1. Represents restricted stock units ("RSUs") for which the Reporting Person is entitled to receive one (1) share of issuer's Common Stock for each RSU upon vesting. The RSUs vest in equal annual installments over 4 years, commencing on October 1, 2023 with the last installment on October 1, 2026 subject to Reporting Person's providing continued service to Issuer through each vesting date.

2. Includes 19,475 RSUs.

3. The stock option will vest in equal annual installments over 4 years, commencing on October 1, 2023 with the last installment on October 1, 2026 subject to Reporting Person's providing continued service to Issuer through each vesting date.

## Remarks:

\*Chief Legal & Compliance Officer, Corporate Secretary

/s/ Lisa Taylor as Attorney-in-

fact for Scot Elder

10/04/2022

\*\* 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.