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

Washington,	D.C.	20549
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL									
OMB Number: 3235-0287									
Estimated average burden									
hours per response:									

Instruction 1(b).			Filed		nt to Section 16(a) of ction 30(h) of the In-					34	Hours	рег георопос.	0.0
1. Name and Address of Reporting Person*  Jain Deepti  (Last) (First) (Middle)  C/O TREACE MEDICAL CONCEPTS, INC.					er Name and Ticke ACE MEDIC					tionship of Reporting Person(s) to Issu all applicable)  Director 10% Ow		wner	
					of Earliest Transact/2024	ction (M	onth/E	Day/Year)		Officer (give title below)	below)	(specify )	
100 PALMETTO PARK PLACE					nendment, Date of	Original	Filed	(Month/Day/Ye	6. Indi Line)	l '			
(Street) PONTE VEDRA	FL									Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)		Rule 10b5-1(c) Transaction Indication  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.									
	Tal	ble I - No	n-Deriva	tive S	ecurities Acq	uired,	Dis	posed of, c	r Bene	eficially	Owned		
Date		2. Transaction Date (Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) Disposed Of (D) (Instr. 3, 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership	
						Code	v	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Common Stock		05/21/2	2024		A		15,091(1)	A	\$0.00	46,326(2)	D		
		Table II -			curities Acqui		•	•		•	wned	,	,

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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		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				
Stock Option (Right to Buy)	\$4.97	05/21/2024		A		33,260		(3)	05/21/2034	Common Stock	33,260	\$0.00	33,260	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 will be 100% vested on the earlier of (a) May 21, 2025 or (b) the date of the 2025 annual meeting of stockholders, subject to Reporting Person's providing continued service to Issuer through the vesting date.
- 2. Includes 15,486 restricted stock units.
- 3. The stock option will vest in 12 substantially equal monthly installments, commencing on June 21, 2024, such that the stock option will be fully vested and exercisable on the earlier of (a) May 21, 2025, or (b) the date of the 2025 annual meeting of stockholders, subject to Reporting Person's providing continued service to Issuer through each vesting date.

/s/ Lisa Taylor as Attorney-infact for Deepti Jain

05/22/2024

\*\* Signature of Reporting Person

Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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.