FORM 4			Washin	gton, D	.C. 20	549				OMB APPI	ROVAL
Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).	STATEME	OMB Number: 3235-0287 Estimated average burden hours per response: 0.5									
1. Name and Address of Reporting Person <sup>*</sup> <u>Treace John T.</u>		uer Name <b>and</b> Tick EACE MEDIC				(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director X 10% Owner				
(Last) (First) ( C/O TREACE MEDICAL CONCEPT 203 FORT WADE ROAD, SUITE 15		03/08	te of Earliest Transa 8/2022				X Officer (give title Other (specify below) below) Chief Executive Officer				
	32081 Zip)	- 4. If A	mendment, Date of	f Origina	al Fileo	I (Month/Day/Y	Line	6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
	le I - Non-Deri	vative	Securities Acc	nuirea	l. Die	sposed of	or Ber	eficially	v Owned		
1. Title of Security (Instr. 3)	2. Transa Date		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities / Disposed Of (	Acquired	(A) or	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	03/08	/2022		A		<b>33,875</b> <sup>(1)</sup>	A	\$ <mark>0</mark>	5,456,455 <sup>(2)</sup>	D	
Common Stock									1,605,000	I	By Wife <sup>(4)</sup>
Common Stock									1,471,250	Ι	By Wife as cotrustee of the JTT Irrevocable Trust dated September 30, 2020 <sup>(4)</sup>
Common Stock									1,839,063	Ι	As Trustee of the Tracy W. Treace Irrevocable Trust datee September 25, 2020 <sup>(5)</sup>
Common Stock									408,816	I	As Co- Trustee of the John R Treace Irrevocable Trust dated July 29,

(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. Deemed Execution Date, if any (Month/Day/Year)		Transaction Derivative Code (Instr. Securities		6. Date Exerc Expiration Da (Month/Day/\	ate	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	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		Transaction(s) (Instr. 4)		
Stock Option (Right to Buy)	\$19.15	03/08/2022		A		240,566		(3)	03/08/2032	Common Stock	240,566	\$0	240,566	D	
Stock Option (Right to Buy)	\$21.065	03/08/2022		A		20,884		(3)	03/08/2027	Common Stock	20,884	\$0	20,884	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 March 8, 2023 with the last installment on March 8, 2026? subject to Reporting Person's providing continued service to Issuer through each vesting date.

2. Includes 33,875 RSUs.

3. The stock option will vest in equal annual installments over 4 years, commencing on March 8, 2023 with the last installment on March 8, 2026; subject to Reporting Person's providing continued service to Issuer through each vesting date. 4. The Reporting Person disclaims beneficial ownership of shares held by his wife directly or in trusts for which his wife serves as trustee or co-trustee.

5. The Reporting Person disclaims beneficial ownership of shares held in trust for which he serves as Trustee or Co-Trustee.

<u>/s/ Lisa Taylor as Attorney-in-</u> <u>fact for John T. Treace</u> 03/10/2022

\*\* Signature of Reporting Person Date

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

 $^{\ast}$  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.