FORM 5

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

ANNUAL STATEMENT OF CHANGES IN BENEFICIAL

washington, b.c. 20040

OMB APPROVAL							
OMB Number:	3235-0362						
Estimated average	burden						

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_	tion 1(b).		OWNERSHIP									Estimated average burden hours per response:					1.0
Form 3	3 Holdings Repo	orted.	File	d pursuant to Se	ection 16	6(a) of th	ie Securit	ies Exch	iange Ag	rt of 1934							
Form 4	Transactions I	Reported.	1 liet	or Section 30													
1. Name and Address of Reporting Person* TREACE JOHN R					2. Issuer Name and Ticker or Trading Symbol TREACE MEDICAL CONCEPTS, INC. [5. Relationship of Reporting Person(s) to Issuer (Check all applicable) X Director 10% Owner						
(Last)								Officer (give title Other (specify below) below)						cify			
(Last) (First) (Middle) C/O TREACE MEDICAL CONCEPTS, INC. 203 FORT WADE ROAD, SUITE 150					3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year) 12/31/2021												
(Street) PONTE VEDRA	4. If Amendm	Line)						•									
(City)	(Sta	ate) (Zip)														
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																	
1. Title of Security (Instr. 3)		3)		2A. Deemed Execution Date, if any (Month/Day/Yea	Cod	nsaction e (Instr.	4. Securities Acquired (A) or Dispos Of (D) (Instr. 3, 4 and 5)				Securities Beneficially		6. Ownership Form: Direct		7. Nature of Indirect Beneficial		
				(Monthin Day) Tea	r) 8)		Amount		(A) or (D)			Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)		(D) or Indirect (I) (Instr. 4)		Ownership (Instr. 4)	
Common Stock			09/07/2021			G		816	D	\$0		1,897,790		I		John I Treace Ginge Treace JTTEI	e and r D.
Common Stock		09/07/2021		A		408,	816	A	\$0		408,816		I		As Co Fruste the Jo Freace Irrevo Frust (July 2 2021 ⁽¹	hn R. cable dated	
	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) 3. Deemed Execution Date, if any (Month/Day/Year) 3. Deemed Code (Instr. Derivative Securities		per 6. D Exp (Mo es	Date Exercisable and piration Date onth/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)			Fitle and rount of curities derlying rivative curity (Instract 4)	8. Price of Derivative Security (Instr. 5)		9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Owners Form: Direct (I or Indire (I) (Instr	nip of Bo O) O ect (li	L. Nature Indirect eneficial wnership nstr. 4)		
										or Numbe	r						

Explanation of Responses:

1. The Reporting Person disclaims beneficial ownership of shares held in trusts for which his spouse is a co-trustee.

/s/ Lisa Taylor as Attorney-infact for John R. Treace 02/11/2022

** Signature of Reporting Person Date

Expiration Date

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

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.

^{*} 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).