FORM 4

obligations may continue. See Instruction 1(b).

Check this box if no longer subject to Section 16. Form 4 or Form 5

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL
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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

1. Name and Address of Reporting Person [*] Elder Scot Michael				_		iymbol I <u>CEPTS, INC.</u> [(Check	tionship of Reportin all applicable) Director Officer (give title	9 Person(s) to Issuer 10% Owner Other (specify	
(Last) C/O TREAC	(First) (Middle) EACE MEDICAL CONCEPTS, INC.			te of Earliest Transa 0/2024	ction (Month/	Day/Year)	X	below)	below Remarks"	
100 PALME	TTO PARK PLA	CE	4. If A	mendment, Date of	Original Filed	(Month/Day/Year)	6. Indiv Line)	idual or Joint/Group	Filing (Check A	pplicable
(Street) PONTE	FL	32081					X	Form filed by One Form filed by Mon Person		
VEDRA			Rul	e 10b5-1(c)	Transact	ion Indication				
(City)	(State)	(Zip)		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.						
		Table I - Non-D	erivative	Securities Acq	uired, Dis	oosed of, or Benef	icially	Owned		
1. Title of Secu	ırity (Instr. 3)	2. T	ransaction	2A. Deemed	3.	4. Securities Acquired (A Dispessed Of (D) (Instr. 2		5. Amount of	6. Ownership	7. Nature

	(Month/Day/Year)	if any (Month/Day/Year)	Code (Instr.		5)	D) (Instr.	,		(D) or Indirect (I) (Instr. 4)	Of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Common Stock	01/10/2024		A		61,300 ⁽¹⁾	Α	\$0.00	110,210 ⁽²⁾	D	

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

			(0)	,				, , ,			,				
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)		5. Numl of Derivati Securiti Acquire (A) or Dispose of (D) (I 3, 4 and	ive ies ed ed nstr.	6. Date Exercisable and Expiration Date (Month/Day/Year)		te Amount of			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)	\$13.46	01/10/2024		A		69,050		(3)	01/10/2034	Stock Option (Right to Buy)	69,050	\$0.00	69,050	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, with the first installment vesting on January 10, 2025 and the last installment vesting on January 10, 2028; subject to Reporting Person's providing continued service to Issuer through each vesting date.

2. Includes 105,932 RSUs.

3. The stock option vests in equal annual installments over 4 years, with the first installment vesting on January 10, 2025 and the last installment vesting on January 10, 2028, 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-	01/12/2024
fact for Scot Elder	01/12/2024
lact for Scot Ender	

** 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.