Instruction 1(b).

FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Check this box if no longer subject	STA
to Section 16. Form 4 or Form 5 obligations may continue. See	

## ATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-028								
Estimated average burden								
hours per response	0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Scanlan Sean F.					2. Issuer Name and Ticker or Trading Symbol TREACE MEDICAL CONCEPTS, INC. [TMCI]									(Che	eck all app Direct	licable)	ing Person(s) to Is  10% O  Other (		
(Last) (First) (Middle) C/O TREACE MEDICAL CONCEPTS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 03/08/2024									below	below)  Chief Innov		below)	
100 PALMETTO PARK PLACE				4. If Amendment, Date of Original Filed (Month/Day/Year)								Line	Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person						
(Street) PONTE VEDRA	FL	3	2081													filed by Mo		orting Person	
(City)						Rule 10b5-1(c) Transaction Indication													
(City)	(50	ate) (z	-ip)		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.								nded to						
		Table	I - Nor	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	oosed of	, or E	3ene	ficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)					Execu ay/Year) if any		Deemed cution Date, by nth/Day/Year)				ties Acquired (A l Of (D) (Instr. 3,		3, 4 and Secu Bene		ially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A) (D)	or Price		Transa	Transaction(s) (Instr. 3 and 4)			(111511. 4)
Common Stock 03/08/2						/2024					389	I	)	\$ <mark>0</mark>	0 96,820 <sup>(1)</sup>			D	
Common Stock 03/10/2					/2024				F		1,396	I	)	\$ <mark>0</mark>	95,424(2)			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)	tive Conversion Date Execution Date, Trar ty or Exercise (Month/Day/Year) if any Cod			Transa Code (	ransaction 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 (Inst 3 and 4)		estr.	3. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	e Over State of	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code V (A) (D)		Date Exercisa	able	Expiration Of Date Title Share		es								

## **Explanation of Responses:**

- 1. Includes 95.681 restricted stock units.
- 2. Includes 94,285 restricted stock units.

/s/ Lisa O. Taylor as Attorney in Fact for Sean Scanlan

\*\* Signature of Reporting Person Date

03/1<u>2/2024</u>

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.