FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	

Check this box if no longer subject to Section 16. Form 4 or Form 5	STATEM
obligations may continue. See	
Instruction 1(b).	

IENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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

1. Name and Address of Reporting Person* MOTT RICHARD W						2. Issuer Name and Ticker or Trading Symbol TREACE MEDICAL CONCEPTS, INC. [TMCI]									heck all app	ector		10% Ov	vner
(Last)	(Fir	st) (N	Middle)			Officer (give title below)												Other (s below)	specify
	C/O TREACE MEDICAL CONCEPTS, INC. 100 PALMETTO PARK PLACE				3. Date of Earliest Transaction (Month/Day/Year) 02/02/2023														
(Street) PONTE VEDRA	FL	3	2081		4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year						r)		. Individual or Joint/Group Filing (Check Applicable ine) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(Sta	ate) (Z	Zip)																
		Table	I - Non-	Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or l	Ben	eficia	ally Own	ed			
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execuracy/Year) if any		cution ny	Deemed cution Date, y nth/Day/Year)				es Acquired (A Of (D) (Instr. 3,			nd Securit Benefit Owned	ties cially I Following	Form (D) o	n: Direct r Indirect istr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(A (D) or)	Price	Transaction(s)				
Common	Stock			02/02/2	2023				S ⁽¹⁾		4,011]	D	\$24	4 1,15	5,000(2)	0 ⁽²⁾ D		
		Tal									osed of, onvertib					d			
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, curity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of		6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Inst 3 and 4)		nstr.	8. Price of Derivative Security (Instr. 5)	e derivative	Owne Form: Direct or Ind (I) (Ins	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)		Date Exercisa	able	Expiration Date	Title	or Nur of	ount mber ares					

Explanation of Responses:

- 1. The sales reported in this Form 4 were effected pursuant to a Rule 10b5-1 trading plan.
- 2. Includes 2,295 RSUs.

Remarks:

/s/ Lisa Taylor as Attorney-infact for Richard Mott

02/03/2023

** 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.