FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL										
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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* Scanlan Sean F. (Last) (First) (Middle) C/O TREACE MEDICAL CONCEPTS, INC. 100 PALMETTO PARK PLACE					TR TM 3. D	2. Issuer Name and Ticker or Trading Symbol TREACE MEDICAL CONCEPTS, INC. [TMCI] 3. Date of Earliest Transaction (Month/Day/Year) 03/09/2023									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director					
(Street) PONTE VEDRA FL 32081 (City) (State) (Zip)						4. If Amendment, Date of Original Filed (Month/Day/Year)									Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person					
(City)	(51			n Doriv	rativo	Soc		00 100	uirod	Die	nocod of	or Pa	nofici	ally	Owner	۸				
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					ction	tion 2A. Deemed Execution Date,		3. Transaction Code (Instr.		4. Securities Acquired (A)			5. Amou and 5) Securiti Benefic		nt of es ally Following	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
									Code	v	Amount	(A) o (D)	Price		Transaci (Instr. 3	tion(s)			(111041.4)	
Common Stock 03/09/2						.023			S ⁽¹⁾		505	D	\$24	.41	9,470(2)		D			
Common Stock 03/10/2						2023		A		22,925(3)) A	\$0.	00 32,		,395(4)		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)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	Execution Date, if any		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercis Expiration Date (Month/Day/Ye:		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se	Price of erivative ecurity nstr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership tt (Instr. 4)	
					Code	v	(A)	(D)	Date Exercis	able	Expiration Date	Title	Amoun or Numbe of Shares							
Stock Option (Right to Buy)	\$24.07	03/10/2023			A	A 51,		51,950	(5)		03/10/2033	Stock Option (Right to Buy)	51,950		\$0.00	51,950)	D		

Explanation of Responses:

- 1. The sale reported on this Form 4 represents shares sold by the Reporting Person to cover tax withholding obligations in connection with the vesting and settlement of RSUs. The sale was to satisfy tax withholding obligations to be funded by a "sell to cover" transaction and does not represent a discretionary transaction by the Reporting Person.
- 2. Includes 8,331 RSUs
- 3. 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 10, 2024 with the last installment on March 10, 2027; subject to Reporting Person's providing continued service to Issuer through each vesting date.
- 4. Includes 31,256 RSUs.
- 5. The stock option will vest in equal annual installments over 4 years, commencing on March 10, 2024 with the last installment on March 10, 2027; subject to Reporting Person's providing continued service to Issuer through each vesting date.

Remarks:

/s/ Lisa Taylor as Attorney-in-

03/10/2023

** 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.