FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Washington, D.C. 200

OMB APPROVAL							
OMB Number:	3235-0287						
Estimated average burden							
hours per response:	0.5						

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

					or	Section	on 30(h)	of th	è Ínves	tment	Company A	ct of 194	0						•	
1. Name and Address of Reporting Person* <u>EW HEALTHCARE PARTNERS FUND</u> <u>2, L.P.</u>				2. Issuer Name and Ticker or Trading Symbol TELA Bio, Inc. [ TELA ]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)  Director 10% Owner  Officer (give title X Other (specify							
(Last) (First) (Middle) 21 WATERWAY AVENUE, SUITE 225						3. Date of Earliest Transaction (Month/Day/Year) 05/02/2022									See footnote 2					
(Street) THE WOODLANDS TX 77380					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)  6. Individual or Joint/Group Filing (Che Line)  Form filed by One Reporting  X Form filed by More than One Person										Perso	n			
(City)	(St	ate) (2	Zip)																	
		Table	I - I	Non-Deriva	ative	e Se	curitie	s A	cquir	ed, C	Disposed	of, or	Benefi	icially Own	ed					
1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye				Exec if an	eemed ution Date, / th/Day/Year)		3. Transaction Code (Instr 8)				ed (A) or str. 3, 4 an	Beneficially Owned Fol	y	Form: Di (D) or Inc		7. Nat Indire Benef Owne	ct icial rship			
									Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	n(s) d 4)			(Instr.	4)	
Common Stock, par value \$0.001 per share 05/02/202			2		P		5,000	A	\$9.32	2 3,360,	3,360,709		I See foo		notes(1)(2)					
Common Stock, par value \$0.001 per share 05/03/202				2		P		5,000	A	\$9.4	3,365,	3,365,709		I Sec foo		notes(1)(2)				
Common Stock, par value \$0.001 per share 05/04/202			2		P		5,000 A \$9.		\$9.53	3,370,	3,370,709		I See footr		notes <sup>(1)(2)</sup>					
		Tal	ble I								sposed o			ially Owne es)	d					
1. Title of Derivative Security (Instr. 3)  2. Conversion or Exercise Price of Derivative Security		Date (Month/Day/Year) if		any		4. Transaction Code (Instr. 8)				ate Ex	vercisable an n Date ay/Year)	d 7. Ti Amo Sec Und Deri	itle and ount of urities erlying vative urity (Inst	8. Price of Derivative Security (Instr. 5)	deriva Secur Benet Owne Follow Repor	ities icially d ving rted action(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Cod	le V	(A)	(0	Date	e rcisab	Expiration of the Date		Amour or Number of Shares	er						
		Reporting Person*	ER	S FUND 2	2 <u>, L</u>	. <u>Р.</u>														
(Last) 21 WAT		(First) /ENUE, SUITE		(Middle)																
(Street)						_														

77380

(Zip)

(Middle)

77380

TX

(State)

(First)

TX

21 WATERWAY AVENUE, SUITE 225

EW HEALTHCARE PARTNERS FUND 2-A,

1. Name and Address of Reporting Person\*

**WOODLANDS** 

(City)

L.P.

(Last)

(Street) THE

WOODLANDS

(City)	(State)	(Zip)							
1. Name and Address of Reporting Person* <u>EW Healthcare Partners Fund 2 GP, L.P.</u>									
(Last) (First) (Middle) 21 WATERWAY AVENUE, SUITE 225									
(Street) THE WOODLANDS	TX	77380							
(City)	(State)	(Zip)							
1. Name and Address of Reporting Person* <u>EW Healthcare Partners Fund 2-UGP, LLC</u>									
(Last) (First) (Middle) 21 WATERWAY AVENUE, SUITE 225									
(Street) THE WOODLANDS	TX	77380							
(City)	(State)	(Zip)							

## **Explanation of Responses:**

1. The Share totals shown above are the aggregate amounts of shares purchased by EW Healthcare Partners Fund 2, L.P. ("Fund 2") and EW Healthcare Partners Fund 2-A, L.P. ("Fund 2-A") on the dates set forth above. Fund 2 purchased 1,500 shares of the amount shown for each date above, and Fund 2-A purchased 3,500 shares of the amount shown above on each such date. Fund 2 now holds a total of 1,364,011 shares and Fund 2-A now holds a total of 2,006,698 shares of the Issuer.

2. EW Healthcare Partners Fund 2 GP, L.P. (the "EW Funds GP"), is the general partner of each of EW Healthcare Partners Fund 2, L.P. ("Fund 2") and EW Healthcare Partners Fund 2-A, L.P. ("EW Fund 2-A" and together with EW Fund 2, the "EW Funds"). EW Healthcare Partners Fund 2- UGP, LLC (the "General Partner") is the general partner of EW Funds GP. The General Partner holds sole voting and dispositive power over the shares held by each of the EW Funds (the "Shares"). The managers of the General Partner are Martin P. Sutter, Ron Eastman, Scott Barry and Petri Vainio (collectively, the "Managers") and may exercise voting and investment control over the Shares only by majority action of the Managers. Each individual Manager, the EW Funds GP and the General Partner disclaims ownership over the Shares except to the extent of his or its respective pecuniary interest therein.

## Remarks:

PARTNERS FUND 2, L.P., By: EW Healthcare Partners Fund 2 GP, L.P., its General Partner, By: EW Healthcare 05/04/2022 Partners Fund 2-UGP, LLC, its General Partner, By: Martin P. Sutter, Attorney-in-Fact, /s/ Martin P. Sutter EW HEALTHCARE PARTNERS FUND 2-A, L.P., By: EW Healthcare Partners Fund 2 GP, L.P., its General Partner, By: EW Healthcare 05/04/2022 Partners Fund 2-UGP, LLC, its General Partner, By: Martin P. Sutter, Attorney-in-Fact, /s/ Martin P. Sutter **EW HEALTHCARE** PARTNERS FUND 2 GP, L.P., By: EW Healthcare Partners Fund 2-UGP, LLC, 05/04/2022 its General Partner, By: Martin P. Sutter, Attorney-in-Fact, /s/ Martin P. Sutter **EW HEALTHCARE** PARTNERS FUND 2-UGP, LLC, By: Martin P. Sutter, 05/04/2022 Attorney-in-Fact, /s/ Martin P. Sutter \*\* Signature of Reporting Person Date

**EW HEALTHCARE** 

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.

 $<sup>^{\</sup>star}$  If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).