FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

TATE	MENT	ΛE	CHA	NCES	

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

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

1. Name and Address of Reporting Person*

L.P.

(Last)

(Street) THE

WOODLANDS

EW HEALTHCARE PARTNERS FUND 2-A,

(First) 21 WATERWAY AVENUE, SUITE 225

TX

(Middle)

77380

	ction 1(b).	n itii iu	e. 366		Filed	l pursu	uant Sect	t to Se	ection 1	6(a	a) of the	e Sec	urities Excha	nge Act	of 1934		L	nours per i	respons	se:	0.5
1. Name and Address of Reporting Person* <u>EW HEALTHCARE PARTNERS FUND</u> <u>2, L.P.</u>					2. 19	or Section 30(h) of the Investment Company Act of 1940 2. Issuer Name and Ticker or Trading Symbol TELA Bio, Inc. [TELA]									Relationship of Reporting Person(s) to Issuer (Check all applicable) Director						
(Last) (First) (Middle) 21 WATERWAY AVENUE, SUITE 225						3. Date of Earliest Transaction (Month/Day/Year) 07/11/2022								below) See footnote 2							
(Street) THE WOODLANDS TX 77380				4. If	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Application) Form filed by One Reporting Person X Form filed by More than One Reporting Person									n .							
(City)	((Stat		ip)	dan Danisa	4:	-		.141				Nia manada	-£	Damefi	alalla Ossa	1				
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye				2A. Deemed Execution Date,				3. Transaction Code (Instr. 8)		4. Securities Acquire Disposed Of (D) (Inst		d (A) or	5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership				
											Code	v	Amount	(A) or (D)	Price	Reported Transaction (Instr. 3 and	n(s) d 4)	(Inst		(Instr.	4)
Common Stock, par value \$0.001 per share 07/11/202			22	2			P		5,000	5,000 A \$8.02 3,595,709		709	I		See footnotes ⁽¹⁾⁽²⁾						
Common Stock, par value \$0.001 per share 07/12/202			22	2				P		5,000	A	\$8.02	3,600,7	3,600,709		I		See footnotes ⁽¹⁾⁽²⁾			
Common Stock, par value \$0.001 per share 07/13/202				2			P		5,000	A	\$8.03	3 3,605,709		I		See footnotes(1)(2)					
			Tal	ole I									sposed of			ially Owne	d				
1. Title of Derivative Security (Instr. 3)	2. Conversic or Exercis Price of Derivative Security	on l	3. Transaction Date (Month/Day/Year)	Exe if ar	Deemed cution Date, ny nth/Day/Year)	4. Trans Code 8)			5. Num of Derivat Securit Acquir (A) or Dispos of (D) (Instr. 3 and 5)	tive ties ed	Exp (Mo	Date Exercisable and piration Date onth/Day/Year) 7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		unt of irities erlying vative irity (Inst	Derivative Security (Instr. 5) Ben Owr Follic Rep		curities Form neficially Direct ned or In			11. Nature of Indirect Beneficial Ownership (Instr. 4)	
						Code	, ,	,	(A) ((D)	Date Exe	e rcisab	Expiratio	n Title	Amour or Number of Shares	er					
			Reporting Person*	ER:	S FUND 2	2, L.	Р.														
(Last)		(F	First)		(Middle)		_														
(Street) THE WOODI	LANDS	Т	X		77380		_														
(City)		(5	State)		(Zip)		_														

(City)	(State)	(Zip)							
1. Name and Address of Reporting Person* <u>EW Healthcare Partners Fund 2 GP, L.P.</u>									
(Last) 21 WATERWAY A	(First) AVENUE, SUITE 22	(Middle)							
(Street) THE WOODLANDS	TX	77380							
(City)	(State)	(Zip)							
1. Name and Address EW Healthcare	of Reporting Person* Partners Fund 2	-UGP, LLC							
(Last) 21 WATERWAY A	(First) AVENUE, SUITE 22	(Middle)							
(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 1,434,511 shares and Fund 2-A now holds a total of 2,171,198 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 07/13/2022 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 07/13/2022 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, 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, 07/13/2022 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.

 $^{^{\}star}$ 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).