SEC Form 4	
------------	--

FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Т

1. Name and Address of Reporting Person" <u>EW HEALTHCARE PARTNERS FUND</u> 2, L.P. (Last) (First) (Middle)					2. Issuer Name and Ticker or Trading Symbol TELA Bio, Inc. [TELA] 3. Date of Earliest Transaction (Month/Day/Year) 09/07/2021							5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title X Other (specify below) See footnote 2								
21 WATERWAY AVENUE, SUITE 225 (Street) THE WOODLANDS TX 77380					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person X Form filed by More than One Reporting Person							
(City)	(St		Zip)																	
Table I - Non-Derivat 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Yea)			n i ear) i	2A. Deemed Execution Date, ar) if any		3. Tran Code	3. Transaction Code (Instr.		4. Securities Disposed Of 5)	Acquire	ed (A) or	5. Amount of Securities Beneficially Owned Following		of /			7. Nature of Indirect Beneficial Ownership			
								Code	e v		Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)		(Instr. 4)		(Instr. 4)	
Common share	ı Stock, par	value \$0.001 pe	r	09/07/202	21			Р			131	A	\$12.7	7	1,784,3	363	I		See footnotes ⁽¹⁾⁽²⁾	
Common share	Common Stock, par value \$0.001 per 09/08/202			1			Р	Τ		47	A	\$13.2	24	1,784,410		Ι		See footnotes ⁽¹⁾⁽²⁾		
		Та	ble II	- Derivati (e.g., pt	ive S uts. d	ecuri	ties Ac warrar	cquirents, o	ed, C ptior	Dis ns.	posed of , converti	, or B ble se	enefic ecuriti	ial es	lly Owned	d			,	
1. Title of Derivative Security (Instr. 3)	ervivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		4. Transaction Code (Instr. 8) Code (Instr. 8) 5. Num Of Derivat Acquir (A) or Dispos of (D) (Instr. 3 and 5)		Expiration Date (Month/Day/Year) ed ed			7. Title and Amount of Securities Underlying Derivative Security (In: 3 and 4)		8. Price of Derivative Security (Instr. 5)		deriva Secur Benef Owne Follov Repor	ities icially d ving ted action(s)	re Owne es Form ally Direc or Inc ig (I) (In d tion(s)		11. Nature of Indirec Beneficia Ownershi (Instr. 4)				
					Code	v	(A) (ate xercis	abl	Expiration e Date	n Title	Amoun or Numbe of Shares	er						
		f Reporting Person [°] ARE PARTN	ERS	FUND 2	2, L.	<u>P.</u>										_				
(Last)		(First) /ENUE, SUITE	(M	/iddle)																
(Street) THE WOODI	LANDS	TX	77	7380																
(City)		(State)	(Zi	Zip)		-														
		f Reporting Person [°] ARE PARTN		FUND 2	<u>2-A</u> ,															
(Last) (First) (Middle) 21 WATERWAY AVENUE, SUITE 225																				
(Street) THE WOODI	LANDS	TX	77	7380																
(City)		(State)	(Zi	Zip)																

1. Name and Address of Reporting Person*

EW Healthcare Partners Fund 2 GP, L.P.										
(Last)	(First)	(Middle)								
21 WATERWAY A	WENUE, SUITE 22	5								
(Street)										
THE WOODLANDS	ТХ	77380								
WOODLANDS										
(City)	(State)	(Zip)								
1. Name and Address	of Reporting Person [*]									
EW Healthcare	EW Healthcare Partners Fund 2-UGP, LLC									
(Last)	(First)	(Middle)								
21 WATERWAY A	VENUE, SUITE 22	5								
(Street)										
THE	тх	77380								
WOODLANDS										

Explanation of Responses:

1. Shares shown above were the aggregate amount 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-A purchased all of the shares of the amounts shown purchased. Fund 2 now holds a total of 742,191 shares and Fund 2-A now holds a total of 1,042,219 shares of the Issuer. 2. EW Healthcare Partners Fund 2 GP, L.P. (the "EW Funds 89,515GP"), 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 Healthcare Partners Fund 2-A, use 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 Healthcare Partners Fund 2-A, use the general partner of each of EW Healthcare Partners Fund 2, L.P. ("Fund 2") and EW Healthcare Partners Fund 2-A, use to the general partner of each of the General Partner is the general partner of EW Funds GP. The General Partner Shares of the General Partner are Martin P. Sutter, Ron Eastman, Scott Bany 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 beneficial ownership over the Shares except to the extent of his or its respective pecuniary interest therein.

Remarks:

EW HEALTHCARE PARTNERS FUND 2, L.P., By: EW Healthcare Partners Fund 2 GP, L.P., its General Partner, By: EW Healthcare 09/09/2021 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 09/09/2021 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, 09/09/2021 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, 09/09/2021 Attorney-in-Fact, /s/ Martin P. Sutter

** 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.