FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL								
OMB Number:	3235-0287							
Estimated average burden								

0.5

hours per response:

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

Name and Address of Reporting Person*     Hughes Bryan W					2. Issuer Name <b>and</b> Ticker or Trading Symbol ORTHOPEDIATRICS CORP [ KIDS ]									check a	onship of Reporting F all applicable) Director Officer (give title below)		• ( )	ssuer Owner	
(Last) (First) (Middle) C/O ORTHOPEDIATRICS CORP.					3. Date of Earliest Transaction (Month/Day/Year) 06/05/2019														Other (specify below)
2850 FRONTIER DRIVE  (Street)  WARSAW IN 46582					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									individual or Joint/Group Filing (Check Applicable ine)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				
(City)	(City) (State) (Zip)  Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transa Date (Month/D				Exe Day/Year) if ar		Executio	A. Deemed Execution Date, fany Month/Day/Year)		3. 4. Sector Dispose Code (Instr. 5)		rities Acquired (A ed Of (D) (Instr. 3,			nd S E	Securities Beneficially		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
									Code	v	Amount	(	(A) or (D)	Price	.  т	Transaction(s) (Instr. 3 and 4)			(mour 4)
Common Stock 06/05.					5/2019	9			A		1,400	1,400 A		\$	)	3,604(1)		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  (Instr. 3)  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  34. Deemed Execution Date, if any (Month/Day/Year)			Date,	4. Transaction Code (Instr. 8)		of Derive Secur Acque (A) or Disposof (D) (Instr	of E		5. Date Exercisable and Expiration Date Month/Day/Year)			tle and ount of urities erlying vative urity (Ins 4)				9. Number of derivative Securities Beneficially Owned Following Reported Transaction( (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Codo	,	(0)		Date		Expiration	Title	Nun of						

## **Explanation of Responses:**

1. Includes restricted stock awards totaling 2,334 shares.

## Remarks:

/s/ Daniel J. Gerritzen, Attorney-in-Fact 06/07/2019

\*\* Signature of Reporting Person Date

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- $^{\star}$  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).

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.