

OMB APPROVAL	
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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

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

1. Name and Address of Reporting Person* <u>Squadron Capital LLC</u>			2. Issuer Name and Ticker or Trading Symbol <u>ORTHOPEDIATRICS CORP [KIDS]</u>			5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director <input checked="" type="checkbox"/> 10% Owner Officer (give title below) _____ Other (specify below) _____		
(Last)	(First)	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) <u>08/11/2022</u>			6. Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person <input checked="" type="checkbox"/> Form filed by More than One Reporting Person		
<u>18 HARTFORD AVE, PO BOX 233</u>			4. If Amendment, Date of Original Filed (Month/Day/Year)					
(Street) <u>GRANBY CT 06035</u>								
(City) (State) (Zip)								

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	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			

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)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
				Code	V	(A)	(D)	Date Exercisable	Expiration Date						Title
Warrants (right to buy)	\$0.0003	08/11/2022		P		1,525,000		(1)	(1)	Common Stock	1,525,000	\$54.9998	1,525,000	D ⁽²⁾	

1. Name and Address of Reporting Person* <u>Squadron Capital LLC</u>		
(Last)	(First)	(Middle)
<u>18 HARTFORD AVE, PO BOX 233</u>		
(Street) <u>GRANBY CT 06035</u>		
(City) (State) (Zip)		
1. Name and Address of Reporting Person* <u>Squadron Capital Holdings LLC</u>		
(Last)	(First)	(Middle)
<u>104 S. MICHIGAN AVE.</u>		
(Street) <u>CHICAGO IL 60603</u>		
(City) (State) (Zip)		

Explanation of Responses:

- Squadron Capital LLC beneficially owns shares of the Issuer's common stock with a market value in excess of the notification threshold of the Hart-Scott-Rodino Antitrust Improvements Act of 1976, as amended (the "HSR Act"). The warrants may not be exercised until the expiration of all applicable HSR Act waiting periods or the exercise otherwise becomes exempt from the notification requirements thereunder. Once the warrants become exercisable, Squadron Capital LLC is obligated to exercise them within five (5) business days.
- These securities are held directly by Squadron Capital LLC. Squadron Capital Holdings LLC is the controlling member of Squadron Capital LLC.

Remarks:

/s/ David R. Pelizzon, President 08/15/2022
of Squadron Capital LLC

/s/ Mary Parthe, Manager of 08/15/2022
Squadron Capital Holdings LLC

** 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.