FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

| 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 30(h) of the Investment Company Act of 1940

| 1. Name and Address of Reporting Person* <u>Huller Kelly</u> | | | | | | 2. Issuer Name and Ticker or Trading Symbol GLOBUS MEDICAL INC [GMED] | | | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner V Officer (give title Other (specify | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|---------------------------------------------|--------------|--------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|---------------------------------------------------------|------------------|---------------------------|---------------------------------|-------------------------------------------------------------------------------------------------|----------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|------------|------------------------------------------|--|--|
| (Last) | , | rst) BUSINESS CEN | (Middle) | | | 3. Date of Earliest Transaction (Month/Day/Year) 03/01/2024 | | | | | | | | helow) | | | | , , | | |
| | | RMISTEAD AV | | | 4. If | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) | ON PA | Λ | 19403 | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (Si | tate) | (Zip) | | Ru | Rule 10b5-1(c) Transaction Indication Check this box to indicate that a transaction was made pursuant to a satisfy the affirmative defense conditions of Rule 10b5-1(c). See Ins | | | | | | | | | contract, instruction or written plan that is intended to ruction 10. | | | | | |
| | | Tab | le I - No | on-Deriv | vative | Sec | curit | ies Ad | quirec | l, Di | sposed o | of, or Be | neficial | ly Owned | t | | | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Date) | | | | Execution Da | | | Code (| Transaction Disposed Of (D) (Instr. 3, 4 a Code (Instr. | | i (A) or : 3, 4 and 5 | Beneficially Owned Following | | Form: Direct | | 7. Nature of Indirect Beneficial Ownership | | | | | |
| | | | | | | | | Code | v | Amount | (A) or (D) | Price | Reporte Transac (Instr. 3 | tion(s) | | 1 | (Instr. 4) | | | |
| Class A Common Stock 03/01/. | | | | | 2024 | 2024 | | | M | | 7,500 | A | \$24.9 | 7, | 7,500 | | D | | | |
| Class A Common Stock 03/01/20 | | | | 2024 | 2024 | | | S ⁽¹⁾ | | 4,385 | D | \$53.79 | (2) 3, | 3,115 | | D | | | | |
| Class A Common Stock 03/01/2 | | | | 2024 | 2024 | | | S ⁽¹⁾ | | 3,115 | D | \$54.53 | (3) | 0 | | 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 | 3. Transaction Date (Month/Day/Year) | 3A. Deer Execution if any (Month/E | on Date, | | Transaction Code (Instr. | | n of l | | Exerci on Da Day/Yo | | 7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4) | | 8. Price of Derivative Security (Instr. 5) | 9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | Ownersh Form: Direct (D or Indire (I) (Instr. | Ownership | Beneficial Ownership ct (Instr. 4) | | |
| | | | | | Code | v | (A) | (D) | Date Exercisa | | Expiration Date | Title | Amount or Number of Shares | | | | | | | |
| Stock Option (Right to Buy Class A Common | \$24.9 | 03/01/2024 | | | M | | | 7,500 | (4) | | 03/04/2024 | Class A Common Stock | 7,500 | \$0 | 0 | | D | | | |

Explanation of Responses:

- 1. This sale was effected pursuant to a Rule 10b5-1 trading plan dated September 7, 2023 executed by the reporting person.
- 2. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at a price range of \$53.36 \$54.31, inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares at each separate price within the range set forth in footnote (2) to this Form 4.
- 3. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at a price range of \$54.43 \$54.64, inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares at each separate price within the range set forth in footnote (3) to this Form 4.
- 4. These options were granted on March 4, 2014 and are fully vested.

/s/ Kelly G. Huller

03/05/2024

** 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.