FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	D C	20540
wasiiiigton,	D.C.	20040

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*  Conlon Mary Elizabeth					2. Issuer Name and Ticker or Trading Symbol biote Corp. [ BTMD ]  3. Date of Earliest Transaction (Month/Day/Year)									(Che	eck all applic Directo Officer	cable) or (give title			Owner (specify		
(Last)	`	irst)	(Middle)			13/31/2023								below)	below)  Genera		below)				
C/O BIOTE CORP.				<b>—</b>																	
1875 W. WALNUT HILL LN #100					4.1	4. If Amendment, Date of Original Filed (Month/Day/Year)									Line	6. Individual or Joint/Group Filing (Check Applicable Line)					
(Street)																_	•		orting Persor		
IRVING	T	X	75038													Form filed by More than One Reporting Person					
(City)	(S	tate)	(Zip)		Rı	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 Inst										n or written	plan th	at is intended	to		
		Tab	le I - Non	-Deriv	ativ	e Se	curit	ies Ac	qui	ired, D	isp	osed o	f, or	Bene	eficiall	y Owned					
1. Title of Security (Instr. 3)  2. Transa Date (Month/D					Execution Date		,	, Transaction Disp Code (Instr. 5)		Disposed	curities Acquired (A osed Of (D) (Instr. 3,			5. Amour Securitie Beneficia Owned F Reported	s ally ollowing	Form (D) or	: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
									-  -	Code	′	Amount		(A) or (D)	Price	Transact (Instr. 3 a	tion(s)		"		
Class A Common Stock 03/3					1/2023			M		39,375		A	(1)	133,269			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. Deemed Execution Da if any (Month/Day/\)	Date,		ransaction ode (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Am of Securities Underlying Derivative Sec (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficial Owned Following Reported Transactio (Instr. 4)	ly Own Forr Dire or In (I) (II	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Dat Exe	te ercisable		xpiration ate	Title	N C	Amount or Number of Shares						
Phantom Stock	(1)	03/31/2023			M			39,375		(2)	0	7/01/2023	Clas Comi	mon 3	39,375	(1)	24,23	1	D		

## **Explanation of Responses:**

- 1. Each share of phantom stock is the economic equivalent of one share of Issuer Class A Common Stock.
- $2. \ Vests\ 54{,}519\ share(s)\ on\ 30-Sep-2022,\ 39{,}375\ share(s)\ on\ 31-Dec-2022,\ 39{,}375\ share(s)\ on\ 31-Mar-2023,\ 24{,}231\ share(s)\ on\ 30-Jun-2023,\ 24{,}231\ share(s)\ on\ 30-Jun-2023,\ 30-Jun-2$

## Remarks:

/s/ Marybeth Conlon

04/04/2023

\*\* 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.