FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB APPROVAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB Number: 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

C/O SURGERY PARTNERS, INC. 310 SEVEN SPRINGS WAY, SUITE 500 4. If Amendment, Date of Original Filed (Month/Day/Year) (Street) BRENTWOOD TN 37027 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of	(Middle) 3. Date of Earliest Transaction (Month/Day/Year) 08/31/2018 EVP, COO of SP Ntl Gr EVP, COO of SP Ntl Gr 4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Line)	Applicable		
4. If Amendment, Date of Original Filed (Month/Day/Year) BRENTWOOD TN 37027 (City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of	4. If Amendment, Date of Original Filed (Month/Day/Year) 6. Individual or Joint/Group Filing (Check Line) X Form filed by One Reporting Pe			
(City) (State) (Zip) Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned 1. Title of Security (Instr. 3) 2. Transaction 2A. Deemed 3. 4. Securities Acquired (A) or 5. Amount of				
1. Title of Security (Instr. 3) 2. Transaction 3. Transaction 4. Securities Acquired (A) or Transaction				
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned			
	Date (Month/Day/Year) Execution Date, if any (Month/Day/Year) (Month/Day/Year) (Month/Day/Year) Baneficially (Month/Day/Year) By Disposed Of (D) (Instr. 3, 4 and 5 Beneficially (D) or Indirect (D) or Indire	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
Code V Amount (A) or (D) Price Transaction(s) (Instr. 3 and 4)	Code V Amount (A) or Price Transaction(s)	(111511.4)		
Common Stock 08/31/2018 F 9,789 ⁽¹⁾ D \$17.55 90,594	08/31/2018 F 9,789 ⁽¹⁾ D \$17.55 90,594 D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)				
Derivative Security (Instr. 3) (Instr. 3) Frice of Derivative Security (Security Security Securities Acquired (A) or Disposed Security Security Security Security Security Securities Acquired (A) or Disposed Security Security Security Security Security Security Security Security Securities Security Security Securities Security Securities Security Security Securities Se	Execution Date, if any (Month/Day/Year) Transaction Code (Instr. 8) Expiration Date (Month/Day/Year) Derivative Securities Underlying Derivative Security (Instr. 3 and 4) Expiration Date (Month/Day/Year) Amount of Securities Securities Underlying Derivative Security (Instr. 3 and 4) Ownership Securities Securiti	Beneficial Ownership (Instr. 4)		

Explanation of Responses:

1. Shares withheld by the Issuer to satisfy the Reporting Person's tax withholding obligations in connection with the vesting on August 31, 2018 of restricted stock that was granted to the Reporting Person on December 21, 2017.

Remarks:

/s/ Bryan S. Fisher 09/05/2018

** 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.