SEC Form 4	
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## FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

0.5

		017.12
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287
	Estimated average bur	rden
Filed oursuant to Section 16(a) of the Securities Exchange Act of 1934	hours per response:	0.5
Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934		

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Instruction 1(b).	onunue. See		Filed pursuant to Section 16(a) of the Securities Exchange Act of 193 or Section 30(h) of the Investment Company Act of 1940	4		hours per res	sponse:	0.5
1. Name and Address Burkhalter Da	1 0	Person <sup>*</sup>	2. Issuer Name and Ticker or Trading Symbol Surgery Partners, Inc. [SGRY]		all applicable Director	e)	son(s) to Issuer 10% Owner	
(Last) C/O SURGERY	(First) PARTNERS	(Middle)	3. Date of Earliest Transaction (Month/Day/Year) 03/04/2024	X	Officer (give below) Chief Hum		Other (speci below) rces Officer	fy
340 SEVEN SPR	INGS WAY	SUITE 600	4. If Amendment, Date of Original Filed (Month/Day/Year)	Line)			g (Check Applic	able
(Street)				X	Form filed b	by One Repo	orting Person	
BRENTWOOD	TN	37027			Form filed b Person	y More thar	n One Reporting	I
(City)	(State)	(Zip)	Rule 10b5-1(c) Transaction Indication	*				
			Check this box to indicate that a transaction was made pursuant satisfy the affirmative defense conditions of Rule 10b5-1(c). See			or written plar	n that is intended	to
		Table I - Non-D	erivative Securities Acquired, Disposed of, or Bene	ficially	Owned			

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)		4. Securities Disposed Of			Securities Beneficially	Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(1150. 4)
Common Stock	03/04/2024		S		586(1)	D	\$30.41 <sup>(2)</sup>	36,592	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 Date, if any (Month/Day/Year)	4. Transa Code ( 8)		of Deriv Secu Acqu (A) of Dispo of (D)	f Expiration Date erivative ecurities cquired A) or isposed f (D) nstr. 3, 4			7. Titl Amou Secur Unde Deriv Secur 3 and	int of rities rlying ative rity (Instr.	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	Amount or Number of Shares				

Explanation of Responses:

1. Shares sold to satisfy the Reporting Person's tax withholding obligations in connection with the vesting of restricted stock on March 2, 2024.

2. The price reported in Column 4 is a weighted average price. The Reporting Person undertakes to provide to 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 sold at each separate price.

## Remarks:

## /s/ Jennifer Baldock, Attorney-03/06/2024

in-Fact

\*\* 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.