FORM 4

Check this box if no longer subject

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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

OMB APPROVAL 3235-0287 Estimated average burden hours per response: 0.5

to Section 16. Form 4 or Form 5 obligations may continue. See Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940 Instruction 1(b).

1. Name and Address of Reporting Person* TAPARO ANTHONY						2. Issuer Name and Ticker or Trading Symbol Surgery Partners, Inc. [SGRY]								(Checl	k all app Direc	onship of Reporti all applicable) Director Officer (give title		ng Person(s) to Issue 10% Owne Other (spec	
(Last) (First) (Middle) C/O SURGERY PARTNERS, INC. 310 SEVEN SPRINGS WAY, SUITE 500						3. Date of Earliest Transaction (Month/Day/Year) 03/26/2021								X	belov			below)	specify
(Street)	WOOD 7	N 3	37027 Zip)		4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								3. Indi Line) X	vidual or Joint/Group Filing (Check Applicable Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	l - No	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benefic	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Disposed Of 5)					4 and Securit		ties cially Following	Forn (D) o		7. Nature of Indirect Beneficial Ownership (Instr. 4)
					Code	v	Amount	(A) or (D)		е	Transaction(s) (Instr. 3 and 4)				(
Common Stock 03/26/20					021(1)				F		1,106	D	\$4	3.75	172,303(1)			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. Conversio or Exercis Price of Derivative Security		Execut if any	Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		vative vrities vired r osed) r. 3, 4 5)	Expirat (Month)	Date Exercisable and Expiration Date (Month/Day/Year) Date Exercisable Expiration Date		7. Title and Amount of Securities Underlying Derivative Security (Insi 3 and 4) Amou or Numb of Title Share:		_		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)

Explanation of Responses:

1. The transaction date and the amount of securities beneficially owned were adjusted to correct an administrative error on the Form 4 filed on March 25, 2021.

Remarks:

/s/ Jennifer Baldock, Attorney- 03/29/2021 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.