Instruction 1(b)

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

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287			
	Estimated average burden				
	hours per response:	0.5			

I

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person [*] DeLuca Teresa			2. Issuer Name and Ticker or Trading Symbol <u>Surgery Partners, Inc.</u> [SGRY]							ationship of Reporting Person(s) to Issuer k all applicable) Director 10% Owner					
(Last)	(First)	(Middle)			te of Earliest Transa 5/2024	action (N	/lonth/	′Day/Year)			Officer (give title below)	Other below	(specify)		
C/O SURGERY PARTNERS, INC. 340 SEVEN SPRINGS WAY, SUITE 600				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Indi Line)	Form filed by One Reporting Person				
(Street) BRENTWOOD TN 37027										Form filed by More than One Reporting Person					
				Rule 10b5-1(c) Transaction Indication											
(City)	(State)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									ended to		
	Tab	le I - Noi	n-Derivati	ive S	ecurities Acq	uired,	Dis	posed of,	or Ber	neficially	Owned				
Date		2. Transactio Date (Month/Day/		2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Disposed Of 5)			5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)			
					Code V		Amount (A) or (D) Pr		Price	Transaction(s) (Instr. 3 and 4)		(
Common Stock 06/06/2)24		Α		6,170(1)	A	\$25.93	58,330	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)		n of		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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 will vest on June 6, 2025.

Remarks:

/s/ Jennifer Baldock, Attorney-06/10/2024

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.