FORM 4

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

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

Name and Address of Reporting Person*     Goodwin George						2. Issuer Name and Ticker or Trading Symbol Surgery Partners, Inc. [ SGRY ]								(Che	eck all app Direc	onship of Reporting Fall applicable) Director Officer (give title below) President, AS		rson(s) to Is 10% O Other (	vner	
(Last) (First) (Middle) C/O SURGERY PARTNERS, INC.						3. Date of Earliest Transaction (Month/Day/Year) 03/10/2021									belov			below)	Specify	
310 SEVEN SPRINGS WAY, SUITE 500						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. In	6. Individual or Joint/Group Filing (Check Applicable					
(Street) BRENTWOOD TN 37027													Line	ine)  X Form filed by One Reporting Person  Form filed by More than One Reporting  Person						
(City) (State) (Zip)													1 6136	, , , , , , , , , , , , , , , , , , ,						
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day)						Execution			Transaction Di		Disposed (	4. Securities Acquired (AD Disposed Of (D) (Instr. 3, 5)		4 and Secur Benef		cially Following	Form (D) o	wnership n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
										v	Amount	(A) (D)	or F	rice	Transa	action(s) 3 and 4)				
Common Stock 03/10/2					2021				A		5,233(1)		A	\$ <mark>0</mark>	14	143,332		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)	Execution Date, if any (Month/Day/Year)		Code ( 8)	Transaction Code (Instr.		of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. 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:		. 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)	

## **Explanation of Responses:**

 $1. \ Shares \ will \ vest \ in \ three \ equal \ annual \ installments \ of \ each \ of \ the \ first \ three \ anniversaries \ of \ March \ 10, \ 2021.$ 

## Remarks:

/s/ Jennifer Baldock, Attorney- 03/12/2021 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.