FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

gton,	D.C.	20549			

OMB APPROVAL 3235-0287 Estimated average burden

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 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

1. Name and Address of Reporting Person* TURNER BRENT					2. Issuer Name and Ticker or Trading Symbol Surgery Partners, Inc. [SGRY]									c all app Direc	licable) tor	ng Person(s) to Iss		vner	
(Last)	(I	First) ((Middle)		3. Date of Earliest Transaction (Month/Day/Year) 06/06/2024									below	er (give title		Other (s below)	pecify	
C/O SURGERY PARTNERS, INC.					4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)						
340 SEVEN SPRINGS WAY, SUITE 600													Form filed by One Reporting Person					on	
(Street)	WOOD T	N 3	37027												Form Perso	filed by Mo	re than C	ne Repo	orting
,—————————————————————————————————————					Rul	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 to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									ided to					
		Table	l - No	n-Deriva	tive S	Secu	rities	Acq	uired,	, Dis	posed of	, or E	Benefi	cially	Own	ed			
1. Title of Security (Instr. 3) 2. Transact Date (Month/Day					Execution Date,		Date,	Transaction Disposed C Code (Instr. 5)		es Acquired (A) or Of (D) (Instr. 3, 4 a			5. Amo Securit Benefic Owned Report	ties cially Following	6. Owner Form: D (D) or In (I) (Instr	Direct of direct I	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
								Code	v	Amount	(A) (D)	or Pri	ce	Transa	ction(s) 3 and 4)				
Common Stock 06/06/2					2024			A		6,170(1)	A	\$2	5.93 6		3,063	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)	perivative Conversion Date Execution Date, ecurity or Exercise (Month/Day/Year) if any		ion Date,	4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) or Dispo of (D) (Instr and 5	rities lired r osed) c. 3, 4	Expiration Day/\(\text{i}\)		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		Der Sed (Ins	Price of rivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ow For Dir or (I)	nership	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amour or Number of Shares	per							

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.