FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

vvasilington,	D.C. 20049	

FATEMENT	OF	CHANGES IN	I BENEFICIAL	OWNERSHIP

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

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

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* TAPARO ANTHONY						2. Issuer Name and Ticker or Trading Symbol Surgery Partners, Inc. [SGRY]										all appl Direct	licable) tor	ng Pe	rson(s) to Is	vner		
(Last)		(Firs	t) (M TNERS, INC.	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 02/28/2024										X	below	r (give title r) Chief Gro	wth	Other (s below) Officer	вреспу	
340 SEVEN SPRINGS WAY, SUITE 600					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)								
(Street)	WOOD '	TN	3	7027												X Form filed by One Reporting Person Form filed by More than One Reporting Person						
(City)	((Stat	e) (Z	Ľip)		Rule 10b5-1(c) Transaction Indication																
							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.															
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
1. Title of Security (Instr. 3) 2. Transact Date (Month/Date)				Execution (Year)		ution Date,				es Acquired (A) Of (D) (Instr. 3, 4			4 and S		5. Amount of Securities Beneficially Owned Following Reported		n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
										Code	v	Amount	(A) or (D) Pr		Price	- 1	Transaction(s) (Instr. 3 and 4)			(1113	(111511.4)	
Common Stock 02/28/2						2024			A		8,338(1)	A	\	\$31.	18	8 103,022			D			
Common Stock 02/28/2					2024				A		2,084(2)	A \$3		\$31.	.18 105,106		5,106		D			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																						
Derivative Conversion Date Execu Security or Exercise (Month/Day/Year) if any				if any	emed ion Date, /Day/Year)	on Date, Transaction Code (Instr.		of Deriv	r osed) r. 3, 4	Expiration Da e (Month/Day/Y		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		nstr.	8. Price Derivat Securit (Instr. §		9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	y	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)			Expiration Date	Title	Amo or Nun of Sha											

Explanation of Responses:

- 1. Represents restricted stock awards ("RSAs") granted to the reporting person on February 28, 2024 (the "Grant Date"). The RSAs vest in three equal annual installments beginning on the first anniversary of the Grant Date.
- 2. Represents restricted stock awards ("RSAs") granted to the reporting person on February 28, 2024 (the "Grant Date"). The RSAs vest in two equal annual installments beginning on the first anniversary of the Grant Date.

Remarks:

/s/ Jennifer Baldock, Attorneyin-Fact 03/01/2024

** 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.