Instruction 1(b).

FORM 4

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

Vashington,	D.C.	20549	

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See	STATEMENT OF
obligations may continue. See	

## 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

1. Name and Address of Reporting Person* <u>TURNER BRENT</u>					2. Issuer Name and Ticker or Trading Symbol Surgery Partners, Inc. [ SGRY ]									k all app	,		son(s) to Is			
(Last)	(Fi	rst) (N	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 06/01/2023									Office below	er (give title v)		Other (s below)	specify		
C/O SURGERY PARTNERS, INC. 310 SEVEN SPRINGS WAY, SUITE 500				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Line)	6. Individual or Joint/Group Filing (Check Applicable Line)  X Form filed by One Reporting Person							
(Street)	Street) BRENTWOOD TN 37027														Form filed by More than One Reporting Person					
(City)	(St	ate) (Z	ľip)		Rule 10b5-1(c) Transaction Indication  Check this box to indicate that a transaction was made pursuant to satisfy the affirmative defense conditions of Rule 10b5-1(c). See In							to a cont Instructio	a contract, instruction or written plan that is intended to truction 10.							
		Table	I - No	n-Deriva	tive S	Secu	rities	Acq	uired	, Dis	posed of	, or I	3enet	ficiall	y Own	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day				Execu y/Year) if any		Deemed cution Date, ly nth/Day/Year)				s Acquired (A) Of (D) (Instr. 3, 4				ties cially I Following	Form (D) o	n: Direct r Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
								Code	v	Amount	(A) (D)	or P	rice		ted action(s) 3 and 4)			(Instr. 4)		
Common Stock 06/01/2				2023				Α		4,192(1)	A	<b>\</b> \$	38.16	.16 61,893			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)	vative Conversion Date Execution Date, irity or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) o Dispo of (D' (Instr	rities lired r osed ) r. 3, 4	Expiration Da		ite	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		De Se (In	Price of Privative Privati	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownersh Form: Direct (D) or Indirect (I) (Instr.	Ownership	Beneficial Ownership (Instr. 4)		
					Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amou or Numb of Share	ber						

**Explanation of Responses:** 

1. Shares will vest on June 1, 2024.

## Remarks:

/s/ Jennifer Baldock, Attorney-04/05/2024 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.