FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL OMB Number: 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* WAGNER KARL B						2. Issuer Name and Ticker or Trading Symbol MEDNAX, INC. [MD]									heck all a Dir	pplicable) ector		Owner	
(Last) (First) (Middle) 1301 CONCORD TERRACE						3. Date of Earliest Transaction (Month/Day/Year) 06/01/2016									^ be	icer (give title ow) President, Ea	other below astern Divisio	′ I	
(Street) SUNRISE FL 33323 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) <mark>X</mark> Fo Fo	·′			
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3) 2. Transac Date (Month/Date)						Execution Date,			3. Transaction Code (Instr. 8) 4. Securities Acquired (Disposed Of (D) (Instr. 3)				d Sec Ben Owr	mount of urities eficially eed Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	1)	A) or D)	Price	Tran	orted saction(s) r. 3 and 4)		(Instr. 4)	
Common Stock 06/01/2							2016		A		23,901	(1)	A \$0.00		00 1	33,414 ⁽²⁾	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. Deem Executior if any (Month/Da	Date,	Date, Transacti Code (Ins				6. Date E Expiratio (Month/D	n Dat	е	Amount of Securities Underlying Derivative Security (Instr. and 4)		ount	8. Price o Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	v	(A)	(D)	Date Exercisa		Expiration Date	Title	Num of Shai	.							

Explanation of Responses:

1. Restricted shares granted pursuant to the Issuer's Amended and Restated 2008 Incentive Compensation Plan, as amended, in connection with annual equity award. The number of shares being reported represents the "target" number of restricted shares and does not include the right of the reporting person to receive up to 5,975 additional shares based on the achievement of certain performance-based criteria for the period from April 1, 2016 through March 31, 2017. The actual number of shares earned could be less than or greater than the target number, depending on the level of performance achieved, and all of the restricted shares granted are subject to forfeiture if minimum levels of performance are not met. Any restricted shares earned will not vest any earlier than in three equal installments on June 1, 2017, June 1, 2018 and June 1, 2019.

2. Includes 1,493 restricted shares granted pursuant to the Issuer's Amended and Restated 2008 Incentive Compensation Plan, as amended, in connection with achievement in excess of target of specified performance-based criteria for the performance period from April 1, 2015 through March 31, 2016, which restricted shares were not previously reported. The additional restricted shares vest in three equal installments on June 1, 2016, June 1, 2017 and June 1, 2018, subject to continued employment.

Remarks:

Dominic J. Andreano, Attorney-in-Fact

06/03/2016

** 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.