FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549

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 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

Name and Address of Reporting Person* Lopez-Blanco Vivian						2. Issuer Name and Ticker or Trading Symbol MEDNAX, INC. [MD]									heck all	nship of Reportir applicable) Director	10%	Owner	
(Last) (First) (Middle) 1301 CONCORD TERRACE					3. Date of Earliest Transaction (Month/Day/Year) 06/01/2017										Officer (give title elow) Chief Fina	belov ncial Officer	′		
(Street) SUNRIS			33323 Zip)		4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)									ne) X F F	Form filed by On	or Joint/Group Filing (Check Applicable in filed by One Reporting Person in filed by More than One Reporting ison		
		Tabl	e I - No	n-Deriv	ative	Se	curitie	es Acc	quired,	Dis	posed o	f, or	Bene	eficia	ılly Ov	vned			
Date			Date	Date (Month/Day/Year) i		2A. Deemed Execution Date, if any (Month/Day/Year)		Code (Transaction Disposed Code (Instr. 5)					d Se Be Ov	Amount of curities eneficially when Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
									Code	v	Amount	(A) or D)	Price	Tra	eported ansaction(s) str. 3 and 4)		(Instr. 4)	
Common Stock				06/01	1/2017				A		23,365	(1) A \$		\$ <mark>0</mark> .	00	71,125.24 ⁽²⁾	D		
		Та									sed of, onvertib				/ Own	ed			
1. Title of Derivative Security (Instr. 3)	ative Conversion Date Execution Date or Exercise (Month/Day/Year) if any		n Date,	4. Transaction Code (Instr. 8)		n of		Expiratio	6. Date Exercisable and Expiration Date (Month/Day/Year)			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		8. Price Derivati Security (Instr. 5	ve derivative Securities	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code	v			Date Exercisa	Date Exercisable I		of Title Share							

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 5,841 additional shares based on the achievement of certain performance-based criteria for the period from April 1, 2017 through March 31, 2018. 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, 2018, June 1, 2019 and June 1, 2020.

2. Reflects a reduction of 3,559 in previously reported target shares that were granted pursuant to the Issuer's Amended and Restated 2008 Incentive Compensation Plan, as amended, in connection with achievement of specified performance-based criteria below target for the performance period from April 1, 2016 through March 31, 2017. The decrease in restricted shares impacts the installments vesting on June 1, 2017, June 1, 2018 and June 1, 2019. The vesting of such shares remains subject to continued employment.

Remarks:

Dominic J. Andreano, Attorney-in-Fact

06/02/2017

** 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.