FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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0.5

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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

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

1. Name and Address of Reporting Person* Pickert Curtis (Last) (First) (Middle) 1301 CONCORD TERRACE						2. Issuer Name and Ticker or Trading Symbol Pediatrix Medical Group, Inc. [MD] 3. Date of Earliest Transaction (Month/Day/Year) 06/01/2024								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner Officer (give title below) EVP, Chief Operating Officer				Owner r (specify v)	
(Street) SUNRISE FL 33323				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)							Individual or Joint/Group Filing (Check Applicable Line) Form filed by One Reporting Person Form filed by More than One Reporting Person							
(City) (State) (Zip)					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.														
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day.					ion	on 2A. Deemed Execution Date,			3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 a			5. Amount of Securities Beneficially Owned Following		6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3	ion(s)			(Instr. 4)	
Common Stock 06/0					1/2024				A ⁽¹⁾		68,400	A	\$0	121	,401		D		
Common Stock 06/01					2024				F ⁽²⁾		751	D	\$7.31	\$7.31 120,650		D			
Common Stock 06/01					024				G ⁽³⁾		2,332	D	\$0	118	118,318		D		
Common Stock														22,4	22,405(3)		I	By The Curtis B. Pickert Revocable Trust	
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	ise (Month/Day/Year) if any (Month/Day/Year)		ition Date,	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exer Expiration D (Month/Day/		ate	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownersh Form: Direct (Di or Indirec (I) (Instr.	Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exercisable		Expiration Date	Title	Amount or Number of Shares						

Explanation of Responses:

- 1. Restricted shares granted pursuant to the Issuer's Amended and Restated 2008 Incentive Compensation Plan (the "Plan"), in connection with an annual equity award. Twenty-five percent (25%) of the restricted shares will vest on June 1, 2025, twenty-five percent (25%) of the restricted shares will vest on June 1, 2026 and fifty percent (50%) of the restricted shares will vest on June 1, 2027, subject to the terms of the Plan.
- 2. Represents 751 restricted shares withheld for payment of taxes upon vesting of shares.
- 3. On June 1, 2024, the reporting person transferred 2,332 shares of common stock to a family trust, of which the reporting person is the trustee. Members of the reporting person's immediate family are the beneficiaries of the trust

/s/ Mary Ann E. Moore, Attorney-in-Fact

06/04/2024

** 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.