FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
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	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 an		2. Issuer Name and Ticker or Trading Symbol MEDNAX, INC. [MD]								5. Relationship of Report (Check all applicable) X Director			ing Person(s) to Issuer 10% Owner						
(Last) 1301 CO	t) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 08/08/2019									er (give title w)		Other (specify below)	
(Street) SUNRISE FL 33323						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 Form filed by More than One Reporting Person				
(City) (State) (Zip)																			
Table I - Non-Deriva 1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye						2A. Deemed Execution Date,		e,	3. Transaction Code (Instr.		4. Securities Disposed Of	5. Amour Securities Beneficia Owned Fe		unt of ies cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership		
					Ì	Code	v	Amount	(A) or (D)	Price	Reported Transact (Instr. 3 a		ction(s)			(Instr. 4)			
Common	19	9			P		64,242	A	\$21.6	77 ⁽¹⁾	7 ⁽¹⁾ 164,530		D						
Common)19	9			P		64,243	A	\$21.6	77(1)	64,243		I	- 1	See Footnote ⁽²⁾				
Common Stock 08/09/2019						9			P		124,553	A	\$21.5	24 ⁽³⁾	28	289,083			
Common Stock 08/09/201						19			P		124,553	A	\$21.5	24 ⁽³⁾	18	8,796	I		See Footnote ⁽²⁾
		Та	ble I								posed of, , convertib				wned				
1. Title of Derivative Security (Instr. 3)	tive Conversion Date Execution Date, or Exercise (Month/Day/Year) if any				5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)			Expi	ration	ercisable and Date J/Year)	7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)		Dei See (Ins	rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction((Instr. 4)	Ow For Dire or I (I) (nership m: ect (D) ndirect Instr. 4)	Beneficial Ownership t (Instr. 4)	
					Code	v	(A)	(D)	Date Exer	cisable	Expiration e Date	Title	Number of Shares						

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions with prices ranging from \$21.35 to \$21.82, inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this section.
- 2. Shares purchased are held by MBF Family Investments, Ltd. ("MBF Family"). The reporting person is the sole owner of MBF Holdings, Inc., the general partner of MBF Family.
- 3. The price reported in Column 4 is a weighted average price. These shares were purchased in multiple transactions with prices ranging from \$21.76, inclusive. The reporting person undertakes to provide the Issuer, any security holder of the Issuer, or the staff of the Securities and Exchange Commission upon request, full information regarding the number of shares purchased at each separate price within the range set forth in this section.

Remarks:

/s/ Dominic J. Andreano, Attorney-in Fact

08/12/2019

** 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.