## FORM 4

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT	<b>OF CHANGES</b>	IN BENEFICIAL	<b>OWNERSHIP</b>

l	OMB APPROVAL								
l	OMB Number: 3235-028								
l	Estimated average burden								
l	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 and Address of Reporting Person $^{\star}$					2. Issuer Name <b>and</b> Ticker or Trading Symbol MEDNAX, INC. [ MD ]									heck all ap Dire	olicable) ctor		Owner	
(Last) (First) (Middle) 1301 CONCORD TERRACE						3. Date of Earliest Transaction (Month/Day/Year) 02/12/2019									A belo	Officer (give title below)  Chief Financial Officer		
(Street) SUNRIS			33323 Zip)		4. If	Ame	ndment	, Date o	of Original	Filed	(Month/Da	ay/Year	)	6. Lir	ne) X Forr	n filed by One n filed by Moi	o Filing (Check e Reporting Per re than One Re	son
Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																		
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da					Execution Date,		3. Transaction Disposed Of (D) (Instr. 3, 4) (5) (8)			(A) or 3, 4 an	d Secur Benef	icially d Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)				
									Code	v	Amount (A) or (D)		Price	Trans	action(s) 3 and 4)		(IIISU. 4)	
Common Stock 02/				02/12	2/2019	2019		A <sup>(1)</sup>		69,626 A		\$0.0	0 169,626		D			
	Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																	
Derivative Security  Instr. 3)  2. Conversion or Exercise Instr. 3)  Price of Derivative Security  3. Transaction Date (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)  (Month/Day/Year)		Date,		nsaction de (Instr. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date		7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of		ount	8. Price of 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)				

## 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 17,406 additional shares based on the achievement of certain performance-based criteria for the twelve months ended December 31, 2019. 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 March 1, 2020, March 1, 2021 and March 1, 2022.

## Remarks:

/s/ Dominic J. Andreano, Attorney-in-Fact 02/14/2019

\*\* Signature of Reporting Person Date

 $Reminder: \ Report \ on \ a \ separate \ line \ for \ each \ class \ of \ securities \ beneficially \ owned \ directly \ or \ indirectly.$ 

- $^{\star}$  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.