FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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	OMB APPROVAL								
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l	OMB Number:	3235-0287							
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	Check this box if no longer subject
\neg	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 or Section 30(h) of the Investment Company Act of 1940

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1. Name a	2. Issuer Name and Ticker or Trading Symbol Pediatrix Medical Group, Inc. [MD]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)										
Pickeit											Direc	tor		10%	Owner					
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 06/07/2023								X	below	,		belov	,	
					00/07/2023									EVP	, Chief (Chief Operating Office		icer		
1301 CONCORD TERRACE						4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)														Line)						
SUNRISE FL 33323													X Form filed by One Reporting Person Form filed by More than One Reporting							
,															Perso	on				
(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														
	sa sa	atisfy t	he affir	mative	defense	condi	tions of Rule 1	10b5-1(c). See Ins	truction	n 10.	iuciion oi i	willen	Jian inai is	intended to					
		Table	I - N	on-Deriva	tive S	ecui	ities	Acc	quired	, Dis	sposed of	f, or E	Benefic	ially	Own	ed				
1. Title of	on 2	1 1				3. 4. Securities Acquired (A					. Amou	nt of	Form: Direct II (D) or E Indirect (I)		7. Nature of					
1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day)					Year) Execution Date, if any (Month/Day/Year)			<i>'</i>				Of (D) (Instr. 3, 4 and			d Securities Beneficially Owned Following		Indirect Beneficial Ownership (Instr. 4)			
									Code	v	Amount	(A) (D)	Price	- R	Reported Transaction(s) (Instr. 3 and 4)		(11150. 4)		(111511.4)	
Common Stock 06/07/20					23				G		1,166(1)	D	\$0.0	0	75,084		D			
																			By The	
																		Curtis B.		
Common Stock												7,150 ⁽¹⁾				I	Pickert			
												1							Revocable	
																			Trust	
		Tab	ole II	- Derivati											Owne	d		•		
				(e.g., pu	ts, cal	lls, v	varra	ınts,	optio	ns,	convertib	le se	curitie	s)						
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year) if	Exec if an	Deemed cution Date, y nth/Day/Year)	4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Expirat (Month	tion D		Amou Secur Unde Deriv Secur	rities rlying ative	Deriv	Price of erivative ecurity nstr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4)		10. Ownersh Form: Direct (D or Indire (I) (Instr.	Beneficial Ownershi ct (Instr. 4)	
				Code	v	(A)	(D)	Date Exercis	sable	Expiration Date	Title	Amount or Number of Shares	r							

Explanation of Responses:

1. On June 7, 2023, the Reporting Person transferred 1,166 shares of common stock to a family trust, of which the Reporting Person is trustee. Members of the Reporting Person's immediate family are the beneficiaries of the trust.

Remarks:

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

06/08/2023

** 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.