FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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OMB APPROVAL

OMB Number: 3235-0287

ı	OMB Number:	3235-0287
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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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.

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

1(c). S	ee Instruction 1	0.																
Name and Address of Reporting Person* Muthukrishnan Sathish				2. Issuer Name and Ticker or Trading Symbol Baldwin Insurance Group, Inc. [BWIN]							Check	tionship of Reporting Person(s) to Is all applicable)						
													1	Direc			10% O\	
(Last)	(Fii E BALDWI	rst) (M	Middle)	P, INC.	3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024									Officer (give title below)		e Other (below)		specify
4211 W. BOY SCOUT BLVD., SUITE 800				4. If Amendment, Date of Original Filed (Month/Day/Year)								idual or	al or Joint/Group Filing (Check A			pplicable		
(Street) TAMPA	FL	. 3	3607										.ine)		filed by On filed by Mo on		Ü	
(City)	(St	ate) (2	Zip)															
		Table	I - Non	-Deriva	tive S	ecui	rities Acq	uired,	Disp	osed of	, or Be	nefic	ially	Own	ed			
1. Title of Security (Instr. 3) 2. Transar Date (Month/Date)				Day/Year) if an		Deemed cution Date, y nth/Day/Year)	Transaction Disposed Code (Instr. 5)		ties Acquired (A I Of (D) (Instr. 3		and	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)		Pric	.	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A (Common St	ock		10/01/	2024			A		387	A	\$	6 <mark>0</mark>	0 4,028 D		D		
		Tal					ties Acqu warrants,							wne	t		7	
1. Title of Derivative Security (Instr. 3)	erivative Conversion Date Execution Date, or Exercise (Month/Day/Year) if any		4. Transac Code (Ir 8)					te Amount of			8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported	y O F D	0. wnership orm: irect (D) r Indirect) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

Date

Exercisable

Date

Explanation of Responses:

Remarks:

/s/ Seth Cohen, as Attorney-

Amount or Number

Shares

in-Fact, for Sathish

Muthukrishnan

Title

10/03/2024

** Signature of Reporting Person Date

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

Code

(A) (D)

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.

 $^{^{\}star}$ 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).