FORM 4

## **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington,	DC	20549	
vvasimigton,	D.O.	20070	

## STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Estimated average burden hours per response: Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

OMB APPROVAL

3235-0287

0.5

OMB Number:

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(0). 3	ee instruction i	U.																
1. Name and Address of Reporting Person*  Muthukrishnan Sathish				2. Issuer Name <b>and</b> Ticker or Trading Symbol Baldwin Insurance Group, Inc. [ BWIN ]							(Che	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
Traditaki isiman saansii														Direct	tor		10% Ov	/ner
		N INSURANCE		P, INC.	3. Date of Earliest Transaction (Month/Day/Year) 01/01/2025							Office below	er (give title		Other (s below)	pecify		
4211 W. BOY SCOUT BLVD., SUITE 800			4. If Amendment, Date of Original Filed (Month/Day/Year)						6 In	6. Individual or Joint/Group Filing (Check Applicable								
(Street) TAMPA FL 33607				4. II Amendment, Date of Original Filed (Month/Day/Year)							Line	Line)  Form filed by One Reporting Person  Form filed by More than One Reporting						
17 1111 7 1	11.	, 3	3007											Perso		re tnan	One Repo	orting
(City)	(St	ate) (Z	Zip)															
		Table	I - Non-	-Deriva	tive S	ecuri	ities Acq	uired,	Dis	posed of	, or	Bene	eficia	lly Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Date)				Execution D		ution Date,	Transaction Disp		Disposed (	Securities Acquired (A sposed Of (D) (Instr. 3			d Securit Benefic Owned	5. Amount of Securities Beneficially Owned Following		Direct Indirect Istr. 4)	7. Nature of Indirect Beneficial Ownership	
							Code	Code V Amount		(A (D	i) or	Price	Reported Transaction(s) (Instr. 3 and 4)				Instr. 4)	
Class A Common Stock 01/01			01/01/2	/2025			A		614	A		\$ <mark>0</mark>	4,642		D			
		Tal					es Acqui arrants,							y Owned	t			
1. Title of Derivative Security (Instr. 3)			n Date,	Transaction Code (Instr. 8)		of	6. Date I Expirati (Month/	on Da		Amount of Securities Underlying Derivative Security (Ins 3 and 4)		nstr.	3. Price of Derivative Security Instr. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	, C	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
	1	I	I			- 1			- 1			Ame	Sunt		1	- 1		I

Date

Exercisable

(A) (D) Date

**Explanation of Responses:** 

Remarks:

/s/ Seth Cohen, as Attorney-

or Number

Shares

in-Fact, for Sathish

Muthukrishnan

Title

01/03/2025

\*\* Signature of Reporting Person Date

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

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.

<sup>\*</sup> If the form is filed by more than one reporting person, see Instruction 4 (b)(v).

<sup>\*\*</sup> Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).