FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APF	PROVAL
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-

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* Matas Barbara Ruth			2. Issuer Name and Ticker or Trading Symbol Baldwin Insurance Group, Inc. [BWIN]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director 10% Owner									
(Last) (First) (Middle)				3. Date of Earliest Transaction (Month/Day/Year) 10/01/2024								Officer (give title Other (spec below) below)								
C/O THE BALDWIN INSURANCE GROUP, INC.																				
4211 W. BOY SCOUT BLVD., SUITE 800				4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable Line)							
(Street)														- 1	Form filed by One Reporting Person					
TAMPA	FL	3	3607									Form filed by More than One Reporting Person								
(City)	(Sta	ate) (Z	ľip)																	
		Table	I - Non	-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or l	Ben	efici	ally Own	ed				
1. Title of Security (Instr. 3) 2. Transac Date (Month/Da				Execution Date,		3. Transaction Code (Instr. 8) 4. Securities Acquired (ADDisposed Of (D) (Instr. 3DD) 5)				nd Securi Benefi Owned	ties Fo cially (D) d Following (I)		orm: Direct) or Indirect (Instr. 4)	7. Nature of Indirect Beneficial Ownership						
						Code	v	Amount	(A) or (D) Pr		Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)				
Class A Common Stock 10/01/2				/2024		Α		387		A	\$0	1:	13,374		D					
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of Derivative Conversion or Exercise Price of Derivative Security			4. Transaction Code (Instr. 8)		5. Nu of Deriv Secu Acqu (A) of Dispo of (D) (Instr and 5	rities lired r osed)	Expiration Date (Month/Day/Yea		e Amount of		,	8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)		10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)				
					Code	v	(A)	(D)	Date Exercisa	able	Expiration Date	Title	or Nur of	ount nber						

Explanation of Responses:

Remarks:

/s/ Seth Cohen, as Attorney-

in-Fact, for Barbara Ruth

Matas

** Signature of Reporting Person Date

10/03/2024

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.

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