SEC Form 4	
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Instruction 1(b)

FORM 4

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287							
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STATEMENT OF (CHANGES IN BE	NEFICIAL OWNERSHIP
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

							inpuny / lot of						
1. Name and Address of Reporting Person [*] <u>Timm Alexander E.</u>				2. Issuer Name and Ticker or Trading Symbol <u>GoHealth, Inc.</u> [GOCO]						ationship of Reporting Person(s) to Issuer k all applicable) Director 10% Owner			
(Last)					action (Month	/Day/Year)		Officer (give title below)	Other below	(specify)		
222 W MERCHANDISE MART PLAZA SUITE 1750				4. If Amendment, Date of Original Filed (Month/Day/Year)						6. Individual or Joint/Group Filing (Check Applicable Line)			
(Street) CHICAGO	Ш	60654								Form filed by Mo Person	re than One Re	porting	
		Rı	Rule 10b5-1(c) Transaction Indication										
(City)	(State)	(Zip)		Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan that is intended to satisfy the affirmative defense conditions of Rule 10b5-1(c). See Instruction 10.									
		Table I - No	on-Derivative	Securities Acc	luired	, Dis	posed of,	or Bei	neficially	/ Owned			
Date		2. Transaction Date (Month/Day/Year	Execution Date,		iction Instr.				5. Amount of Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership		
				Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)		
Class A Comm	on Stock	06/12/2024		A		14,605(1)	A	\$10.27	38,524	D			

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transa Code (8)		of		6. Date Exerc Expiration Da (Month/Day/Y	7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		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 Exercisable	Expiration Date	Title	Amount or Number of Shares				

Explanation of Responses:

1. Represents a grant of restricted stock units which vest in four substantially equal quarterly installments, with the first such quarterly installment vesting on September 12, 2024. Remarks:

> /s/ Bradley Burd, Attorney-in-07/18/2024 fact

** 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.