SEC Form 4

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FORM 4

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

OMB APPROVAL

OMB Number:	3235-0287								
Estimated average burden									
hours per response:	0.5								

Check this box if no longer subject 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

									mesune		прану Асі	. 01 10-	40							
1. Name and Address of Reporting Person*					2. Issuer Name and Ticker or Trading Symbol GoHealth, Inc. [GOCO]									5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
<u>Farley Brian</u>					1			L		-					Directo			10% O		
						2 Date of Farliant Transaction (Manth/Day/Maar)								- 2	Contraction Officer below)	(give title		Other (below)	specify	
(Last) (First) (Middle)						3. Date of Earliest Transaction (Month/Day/Year) 07/15/2020									,	Chief Le	oal O	, , ,		
214 WE	ST HURON	I ST.														Chief De	.gui O	fileer		
					4.	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable					
(Street)			00054											Line	, ,		Done	rting Doroo	-	
CHICAC	GO II	-	60654										4	Form filed by One Reporting Person Form filed by More than One Reporting						
(City)	(S	itate)	(Zip)												Form fi Person		re than	i One Repo	ting	
(0.13)			(=.p)																	
		Та	ble I - No	n-Deriv	/ativ	ve Se	ecuritie	s Ac	quired	, Dis	posed o	of, oi	r Ben	eficially	/ Owned					
1. Title of Security (Instr. 3) 2. Transa Date (Month/D				nsaction h/Day/Year)				Code (Instr.						Beneficia	s Illy	Form (D) o		7. Nature of Indirect Beneficial Ownership (Instr. 4)		
							(Month/Day/Yea		ar) 8)		ļ					Owned Following Reported			istr. 4)	
									v	Amount		(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)				,		
Class A Common Stock 07/15/				5/2020			A		47,620 ⁽¹⁾ A		\$0.00	47,	47,620		D					
			Table II -	Deriva	tive	Sec	urities	Aca	uired. I	Disp	osed of	. or E	Benef	icially (Owned					
											converti									
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution D if any (Month/Day/	ate, Tr	4. Transaction Code (Instr 8)				6. Date E Expiratio (Month/D	n Dat		7. Title and Amo of Securities Underlying Derivative Secu (Instr. 3 and 4)		ecurity	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securitie Beneficia Owned Following Reported	ve es ally ng d tion(s)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirec Beneficia Ownershi (Instr. 4)	
				c	ode	v	(A) (D)		Date Exercisable		Expiration Date	:		imount r lumber f Shares		(Instr. 4)				
Stock	\$21	07/15/2020			Α		272,109		(2)		(2)	Com	imon -	72.109	(2)	272,1	09	D		

Explanation of Responses:

1. Represents a grant of restricted stock units which vest as to 25% on the two year anniversary of the grant date, as to 25% on the three year anniversary of the grant date and as to the remainder of the shares on the four year anniversary of the grant date.

2. The stock option vests in four equal annual installments, with the first such annual installment vesting on July 15, 2021.

Remarks:

Option

/s/ Clinton P. Jones, Attorney-07/17/2020

Stock

in-fact for Brian Farley

** 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.