FORM 4

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

Washington, I	D.C. 20549
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Check this box if no longer subject	STA
to Section 16. Form 4 or Form 5	
obligations may continue. See	
Instruction 1(b).	

## TEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL							
OMB Number: 3235-028							
Estimated average burden							
hours per response:	0.5						

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. Name and Address of Reporting Person* <u>Cruz Shane E.</u>					2. Issuer Name and Ticker or Trading Symbol GoHealth, Inc. [ GOCO ]										Relationship of Reporting Person(s) to Issuer (Check all applicable)     Director 10% Owner     Officer (give title Other (specify))				
(Last)	(Fir	,	/liddle)		3. Date of Earliest Transaction (Month/Day/Year) 04/10/2023									belov	er (give title v) Chief Stra	tegy Off	below)	specify	
(Street)	GO IL	6	0654		4. If <i>I</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Lir	Individual or Joint/Group Filing (Check Applicable ne)  X Form filed by One Reporting Person Form filed by More than One Reporting Person				on
(City)	(Sta	ate) (2	Žip)		Rule 10b5-1(c) Transaction Indication  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.									nded to					
		Table	I - Noi	n-Deriva	ative S	Secu	rities	Acq	uired,	Dis	posed of	, or	Ben	eficia	ally Own	ed			
1. Title of Security (Instr. 3)  2. Transac Date (Month/Da				Exec ay/Year) if any		Deemed cution Date, ny nth/Day/Year)				Disposed (	ies Acquired (A) Of (D) (Instr. 3,			Benefic Owned	ties cially I Following	6. Owner Form: Di (D) or In- (I) (Instr.	irect direct 4)	7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A (C	A) or O)	Price	Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)
Class A Common Stock 04/10/2					2023		Α		25,000 <sup>(1</sup>	) A \$0		198,094		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)	Derivative Conversion Date Security or Exercise (Month/Day/Year) if any			4. Transaction Code (Instr. 8)		of Deriv	r osed ) r. 3, 4	6. Date Expirat (Month	ion Da			f 9	8. Price of Derivative Security (Instr. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y Ow For Dire or I (I) (	nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Code V		(A)	(D)	Date Exercis	able	Expiration Date	Title	or Nur of	ount mber ares					

## **Explanation of Responses:**

1. Represents a grant of restricted stock units which vest in two equal annual installments, with the first such annual installment vesting on April 10, 2024.

## Remarks:

/s/ Kasey Wroblewski, Attorney-in-fact

04/12/2023

\*\* Signature of Reporting Person Date

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

- $^{\star}$  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).

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.