

OMB APPROVAL	
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**STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP**

Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).

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>Matthiesen Travis J.</u>  (Last) (First) (Middle) <u>214 WEST HURON ST.</u>  (Street) <u>CHICAGO IL 60654</u>  (City) (State) (Zip)	2. Issuer Name and Ticker or Trading Symbol <u>GoHealth, Inc. [ GOCO ]</u>	5. Relationship of Reporting Person(s) to Issuer (Check all applicable) Director _____ 10% Owner _____ <input checked="" type="checkbox"/> Officer (give title below) _____ Other (specify below) _____ <p style="text-align: center;"><b>Chief Financial Officer</b></p>
	3. Date of Earliest Transaction (Month/Day/Year) <u>07/17/2020</u>	
4. If Amendment, Date of Original Filed (Month/Day/Year)		

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code	V	Amount	(A) or (D)	Price			

**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. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)		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
<u>Blizzard Management Feeder LLC Interests</u>	<u>(1)</u>	<u>07/17/2020</u>		<u>D<sup>(2)</sup></u>		<u>25,972</u>		<u>(3)</u>	<u>(3)</u>	<u>LLC Interests</u>	<u>25,972</u>	<u>\$19.95<sup>(2)</sup></u>	<u>1,468,204</u>	<u>D</u>	

**Explanation of Responses:**

- Blizzard Management Feeder Interests ("Feeder Interests") are convertible at the option of the holder for LLC Interests on a 1-for-1 basis, which will be subsequently redeemed for an equal number of shares of Class A Common Stock.
- As described in the prospectus filed by the Issuer with the Securities and Exchange Commission, upon the closing of the offering, the Issuer redeemed the Feeder Interests from the reporting person in exchange for an aggregate consideration of \$19.95 per Feeder Interest.
- 1,051,870 of the Blizzard Management Feeder LLC Interests ("Feeder Interests") are currently vested. The remaining Feeder Interests will vest in five equal annual installments beginning on September 13, 2020 and have no expiration date..

**Remarks:**

/s/ Clinton P. Jones, Attorney-in-fact for Travis J. Matthiesen 07/21/2020  
 \*\* 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.**