FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

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

| | Check this box if no longer subject |
|--------|-------------------------------------|
| \Box | to Section 16. Form 4 or Form 5 |
| \cup | obligations may continue. See |
| | Instruction 1(h) |

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

| Name and Address of Reporting Person* Hunt James S | | | | | 2. Issuer Name and Ticker or Trading Symbol BROWN & BROWN, INC. [BRO] | | | | | | | | (Cł | 5. Relationship of Reporti (Check all applicable) X Director | | | 10% Owner | | | |
|--|--|---------|--------|---|---|---|---|------------------------------------|---------------------|---|--|---------------|----------------|---|-------------------------------|--|---|---|---------|--|
| (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 08/08/2023 | | | | | | | | | belo | er (give title w) | | Other (s | specify | |
| 300 N. BEACH STREET | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | | |
| (Street) DAYTO BEACH | DAYTONA EI 32114 | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | |
| (City) | (St | ate) (Z | Zip) | | 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. | | | | | | | | | | | | | | | |
| | | Table | l - No | n-Deriva | tive S | ecui | rities | Acq | uired, | Dis | osed of | f, or | r Ber | efici | ally Ow | ned | | | | |
| 1. Title of Security (Instr. 3) 2. Transacti Date (Month/Day | | | | | Execution D | | Date, | Code (Instr. | | 4. Securities Acquired (and Disposed Of (D) (Instr. 35) | | | | Secur Bene Owne Follor | ficially d ving | 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 | | rted action(s) 3 and 4) | | | | | |
| Common Stock, \$.10 par value 08/08/20 | | | | | 2023 | | | G | | 216 | | D | \$0.0 | 0 2 | 22,000 | | 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) | ative Conversion Date Execution Date, if any | | | 4. Transaction Code (Instr. 8) | | Secu Acqu (A) o Disp of (D | vative irities ired ir osed) r. 3, 4 | 6. Date E Expiratio (Month/E | on Da | | 7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and | | f g | 8. Price of Derivative Security (Instr. 5) | | y C | 10. Dwnership Form: Direct (D) or Indirect I) (Instr. 4) | Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | | (A) | (D) | Date Exercisable | | Expiration Date | Titl | or Nu of | mber ares | | | | | | |

Explanation of Responses:

Remarks:

/s/ James S. Hunt

08/08/2023

** 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.