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
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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL 3235-0287 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

Name and Address of Reporting Person* LOYD ROBERT W						2. Issuer Name and Ticker or Trading Symbol BROWN & BROWN, INC. [BRO]									tionship of Reportir all applicable) Director Officer (give title		ng Person(s) to Iss 10% Ow Other (s		ner
(Last) 220 SOU	(Fir	est) (I	Middle) UE		3. Date of Earliest Transaction (Month/Day/Year) 08/12/2020									X	belov	below) be EVP, Secy, General Co			·
(Street) DAYTONA BEACH FL 32114 (City) (State) (Zip)				4. If A	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indi Line) X	Form Form	Form filed by One Reporting Person Form filed by More than One Reporting Person				
		Table	I - Noi	n-Deriva	tive S	Secu	rities	Acq	uired,	Dis	posed of	, or E	Benefi	cially	/ Own	ed			
Date			Date	ate Month/Day/Year)		2A. Deemed Execution Date, if any (Month/Day/Year)				Disposed (I. Securities Acquired (A Disposed Of (D) (Instr. 3,			5. Amo Securit Benefic Owned Report	ties cially Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)		7. Nature of Indirect Beneficial Ownership	
									Code	v	Amount	(A) (D)	or Pri	ce	Transa	action(s) 3 and 4)			(Instr. 4)
Common Stock, \$.10 par value 08/1				08/12/	2020				G	V	2,300	I	\$(0.00	17	,856(1)		D	
Common	ommon Stock, \$.10 par value (2010 SIP)														60,075(2)			D	
Common	mon Stock, \$10 par value (2019 SIP)													2,576 ⁽³⁾			D		
Common Stock, \$.10 par value (PSP)													21,048 ⁽⁴⁾			D			
		Tal									osed of, o				Owne	d			
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed on Date, (Day/Year)	n Date, Transac		of		6. Date Exerci Expiration Dat (Month/Day/Ye		te	7. Title and Amount of Securities Underlying Derivative Security (Ins 3 and 4)		De Se (In	Price of rivative curity str. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	у	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership t (Instr. 4)
							(A)	(D)			Expiration Date	Title	or Numbe of Shares	er					

Explanation of Responses:

- 1. A total of 696 of these shares were acquired through the Company's Employee Stock Purchase Plan in July 2020. Number of shares may vary due to dividend reinvestment.
- 2. These securities were granted pursuant to the Company's 2010 Stock Incentive Plan ("2010 SIP"). The Reporting Person has voting rights and dividend entitlement with respect to these shares, but full ownership will not vest until the satisfaction of service-based conditions
- 3. These securities were granted pursuant to the Company's 2019 Stock Incentive Plan ("2019 SIP"). The Reporting Person has voting rights and dividend entitlement with respect to these shares, but full ownership will not vest until the satisfaction of service-based conditions.
- 4. These securities were granted pursuant to the Company's Performance Stock Plan ("PSP"). Based on the satisfaction of conditions established pursuant to the PSP, the Reporting Person has voting rights and dividend entitlement with respect to these shares based on the satisfaction of certain performance-based criteria, but full ownership will not vest until the satisfaction of additional conditions.

Remarks:

/s/ Robert W. Lloyd

08/14/2020

** 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.