FORM 4

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

Washington,	D.C.	20549		

OIVIB 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).

Check this box to indicate that a transaction was made pursuant to a contract, instruction or written plan for the purchase or sale of equity securities of the issuer that is intended to satisfy the affirmative defense conditions of Rule 10b5-

## 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

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Name and Address of Reporting Person*     Nicon Toronthop					2. Issuer Name and Ticker or Trading Symbol Root, Inc. [ ROOT ]								Relationship of Reporting Person(s) to Issuer (Check all applicable)							
Allison Jonathan								•						Direc	tor		10% O\	wner		
														_ [	Office below	er (give title v)		Other (s	specify	
(Last) (First) (Middle)					3. Date of Earliest Transaction (Month/Day/Year) 01/16/2025								Chief Administrative Officer							
C/O ROOT, INC.					01/10/2023															
80 E. RICH STREET, SUITE 500																				
					4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable						
(Street)															Line	,	filed by On	a Pan	ortina Pere	on
COLUM	BUS	OH	4	3215												Form filed by One Reporting Person  Form filed by More than One Reporting				
,																Person				
(City)		(Sta	te) (2	<u>Z</u> ip)																
			Table	I - No	n-Deriva	tive S	Secu	rities	s Acq	uired,	, Dis	posed of	, or E	Bene	eficia	ly Own	ed			
1. Title of S	Security (	Insti	·. 3)		2. Transac	Execution Date, Tr			3.	4. Securities Acquired (A)						6. Ownership		7. Nature		
			•		Date (Month/Da				Transaction Disposed Of (D) (Instr. Code (Instr. 5)			nstr. 3	3, 4 and	Securit Benefic				of Indirect Beneficial		
(monan)					(Month/Day/Year)			8)					Following (i) (		(Instr. 4)	Ownership (Instr. 4)				
										Code	v	Amount	(A) (D)	or F	Price	Transa	ction(s) 3 and 4)			(111511.4)
Class A Common Stock 01/16/2					2025				F		15(1)	D \$8		\$88.3	60,542			D		
			Tal	۔ اا ماد	Dorivati	V0 S0	Curi	tioe	Acau	irad [	Dien	osed of a	or Bo	nof	icially	, Owner	d			
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)																				
1. Title of	2. Convers		3. Transaction Date	3A. Dec		4.			umber			isable and	7. Titl			. Price of	9. Number		10.	11. Nature
Derivative Security	Execut if any	ion Date,		Transaction Code (Instr.		of Derivative		Expiration Date Amoun (Month/Day/Year) Securit					Derivative Security	e derivative Securities			of Indirect Beneficial			
Security (Instr. 3) Or Exercise Price of Derivative (Month/Day/Year) if any (Month.				/Day/Year)	8)			Securities		(Month Day rear)			Underlying Derivative		Instr. 5)	Beneficiall Owned	у	Direct (D) or Indirect	Ownership	
	Security	۱ ۳						Acquired (A) or					Security (Instr.		nstr.		Following Reported Transaction(s)		(I) (Instr. 4)	(Instr. 4)
									Disposed of (D) (Instr. 3, 4 and 5)					3 and 4)						
																	(Instr. 4)			
								1						Am	ount					
										Date				or						
									Expiration				Numb of							
						Code	V	(A)	(D)	Exercis	able	Date	Title	Sha	res					

## **Explanation of Responses:**

1. These shares of common stock were withheld by the Issuer to satisfy tax withholding obligations associated with the vesting of restricted stock units.

## Remarks:

/s/ Jodi Baker, Attorney-in-

01/17/2025

fact

\*\* 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.