FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| ashington, | D.C. | 20549 | |
|------------|------|-------|--|
| | | | |

| STATEMENT | OF CHANGES | S IN BENEFICIAL | OWNERSHIP |
|------------------|------------|-----------------|------------------|

| l | OMB APPROVAL | | | | | | | | | |
|---|-----------------------|-----------|--|--|--|--|--|--|--|--|
| | OMB Number: | 3235-0287 | | | | | | | | |
| ı | Estimated average bur | den | | | | | | | | |
| | 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).

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* Allison Jonathan | | | | | 2. Issuer Name and Ticker or Trading Symbol Root, Inc. [ROOT] | | | | | | | | | | k all app Direc | licable) tor | ng Pei | rson(s) to Is | vner |
|--|---|--|---------|--------------------------------|---|-----------------|---|------------------|--|--|---|---|---|---|---|--|--|--------------------|------------|
| (Last) | • | rst) (M | Middle) | | 3. Date of Earliest Transaction (Month/Day/Year) 02/16/2024 | | | | | | | | | X | belov | ′ | istrati | Other (s below) | · |
| 80 E. RICH STREET, SUITE 500 | | | | | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | | 6. Individual or Joint/Group Filing (Check Applicable Line) | | | | | pplicable | | |
| (Street) | BUS OI | BUS OH 43215 | | | | | | | | | | | | | X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | |
| (City) | 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 - Noı | n-Deriva | tive S | Secui | rities | Acq | uired, | Dis | posed of | , or E | enefi | cially | / Own | ed | | | |
| 1. Title of Security (Instr. 3) 2. Transac Date (Month/Da | | | | y/Year) Execution | | ution Date, Tra | | Transa Code (| Transaction Disposed Of (D) (Instr. 3, Code (Instr. 5) | | | , 4 and Secu Bene Own | | cially Following | Form (D) o | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership | | |
| | | | | | | | | | Code | v | Amount | (A) (D) | or Pri | rice Repo | | action(s) 3 and 4) | | | (Instr. 4) |
| Class A Common Stock | | | 02/16/2 | 2024 | | | | F | | 11(1) | Г | \$ | 8.91 | 1 75,637 | | | 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) | 2. Conversion or Exercise Price of Derivative Security | 3. Transaction Date (Month/Day/Year) | if any | emed on Date, (Day/Year) | 4. Transaction Code (Instr. 8) S. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5) | | Expiration Date (Month/Day/Year) Amo Secu Unde Deriv Secu | | | 7. Title Amou Secur Under Deriva Secur 3 and | nt of ities lying ative ity (Inst 4) | De Ser (In: | 8. Price of Derivative Security (Instr. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4) | у | 10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 11. Nature of Indirect Beneficial Ownership (Instr. 4) | | |
| | | | | | Code | | | Date Exercis | or Num te Expiration of | | Numbe | er | | | | | | | |

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-

fact

02/20/2024 ** 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.