FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

OMB 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

| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHI |
|-----------|------------|---------------|-----------------|
| STATEMENT | OF CHANGES | IN BENEFICIAL | OWNERSHI |

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

| 10b5-1(c). See I | Instruction 10. | | | | | | | |
|---|-----------------|----------------|--|---------------|--|-----------------------|--|--|
| 1. Name and Address of Reporting Person* Bienen Henry S | | son* | 2. Issuer Name and Ticker or Trading Symbol <u>RYAN SPECIALTY HOLDINGS, INC.</u>] | | | | | |
| (Last) (First) (Middle) 155 NORTH WACKER DRIVE, SUITE 4000 | | , | 3. Date of Earliest Transaction (Month/Day/Year) 06/14/2024 | | Officer (give title below) | Other (specify below) | | |
| (Street) CHICAGO (City) | IL (State) | 60606 (Zip) | 4. If Amendment, Date of Original Filed (Month/Day/Year) | 6. Indiv X | idual or Joint/Group Filing Form filed by One Rep Form filed by More tha | · · · · / | | |

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 | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | 7. Nature of Indirect Beneficial Ownership |
|---------------------------------|--|---|---|---|--|---------------|---------------|--|---|--|
| | | | Code | v | Amount | (A) or (D) | Price | Transaction(s) (Instr. 3 and 4) | | (Instr. 4) |
| Class A Common Stock | 06/14/2024 | | G | | 2,496 | D | \$0.00 | 0.00 | D | |
| Class A Common Stock | 06/14/2024 | | G | | 1,248 | A | \$0.00 | 25,718 | I | In Henry S. Bienen 1997 Trust Dated November 10, 1997 |
| Class A Common Stock | 06/14/2024 | | G | | 1,248 | A | \$0.00 | 28,671 | I | In Leigh Buchanan Bienen 1997 Trust Dated November 10, 1997 |

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of 3. Transaction 3A. Deemed 5. Number of 6. Date Exercisable and 7. Title and Amount of 8. Price of 9. Number of 11. Nature 2 4. 10. Derivative Conversion Date Execution Date. Transaction Derivative Expiration Date Securities Underlying Derivative derivative Ownership of Indirect or Exercise Price of (Month/Day/Year) Security (Instr. 3) (Month/Day/Year Code (Instr. Securities **Derivative Security** Securities Form: Beneficial if any Security Acquired (A) or Disposed of (D) (Instr. 3, 4 (Month/Dav/Year) Direct (D) 8) (Instr. 3 and 4) (Instr. 5) Beneficially Ownership Derivative Owned or Indirect (Instr. 4) Following (I) (Instr. 4) Security and 5) Reported Transaction(s) Amount (Instr. 4) or Date Exercisable Expiration Date Number of Shares v (A) (D) Title Code

Explanation of Responses:

Remarks:

/s/ Mark S. Katz, as Attorney-in-Fact 06/18/2024

** 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.