FORM 4

# **UNITED STATES SECURITIES AND EXCHANGE COMMISSION**

Washington, D.C. 20549

OMB APPROVAL

OMB Number:	3235-0287
Estimated average burde	en
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

### 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

affirmative defense 10b5-1(c). See Instr							
1. Name and Address COLLINS MIC (Last)		(Middle)	Issuer Name and Ticker or Trading Symbol     RYAN SPECIALTY HOLDINGS, INC. [ RYAN ]  3. Date of Earliest Transaction (Month/Day/Year)		ionship of Reporting Person(s) all applicable) Director Officer (give title below)	10% Owner Other (specify below)	
155 NORTH WACKER DRIVE, SUITE 4000			05/30/2025			·	
(Street) CHICAGO	IL	60606	4. If Amendment, Date of Original Filed (Month/Day/Year)	6. Indivi	dual or Joint/Group Filing (Che Form filed by One Reporting Form filed by More than On	g Person	
(City)	(State)	(Zip)					

### Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)			Transaction Code (Instr.		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)			Securities Beneficially Owned Following Reported	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	Beneficial Ownership
			Code	v	Amount	(A) or (D)	Price	Transaction(s) (Instr. 3 and 4)		(Instr. 4)
Class A Common Stock	05/30/2025		A		2,323(1)	A	\$0	13,462(2)	D	

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

-1	1. Title of	2.	3. Transaction	3A. Deemed	4.				6. Date Exercisable and		7. Title and Amount of		8. Price of	9. Number of	10.	11. Nature	ı
-1	Derivative	Conversion	Date	Execution Date,	Transaction		ction Derivative		Expiration Date		Securities Underlying		Derivative	derivative	Ownership	of Indirect	L
-1	Security (Instr. 3)	or Exercise	(Month/Day/Year)	if any	Code (Instr.		Code (Instr. Securities		(Month/Day/Year)		Derivative Security		Security	Securities	Form:	Beneficial	L
-1		Price of		(Month/Day/Year)	8)	8) Acquired (A)		1 10		(Instr. 3 and 4)		(Instr. 5)	Beneficially	Direct (D)	Ownership	L	
-1		Derivative			or Disposed of		or Disposed of			1			Owned	or Indirect	(Instr. 4)	L	
-1		Security			(D) (Instr. 3, 4		,4			Following	(I) (Instr. 4)		L				
-1					and 5)		and 5)		l			Reported			L		
-1													1	Transaction(s)			L
-1						l						Amount		(Instr. 4)			L
-1						l						or					1
-1						l			Date	Expiration		Number					1
1					Code	٧	(A)	(D)	Exercisable	Date	Title	of Shares					

## Explanation of Responses:

- 1. The reported securities represent Restricted Stock Units that vested immediately upon grant for which the reporting person has elected to defer settlement until their separation from service on the board of directors. Such grant was approved by the Board of the Issuer for purposes of Rule 16(b)(3)
- 2. Includes 10,462 Restricted Stock Units that vested immediately upon grant for which the reporting person has elected to defer settlement until their separation from service on the board of directors.

# Remarks:

/s/ Mark S. Katz, as Attorney-in-

Fact

\*\* Signature of Reporting Person

06/03/2025

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.