FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington,	D.C.	20549	
rvasiliigton,	D.C.	20343	

STATEMENT OF CHANGES IN BENEFICIA	L OWNERSHIP

OMB APPROVAL											
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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* Miller Mark						2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [GSHD]									all appli Directo	or	g Pers	10% O	vner	
	LANA BLV	/D	Middle))		3. Date of Earliest Transaction (Month/Day/Year) 08/25/2020									Officer below)	(give title		Other (s	specify	
BUILDING 4, SUITE 4500 (Street) WESTLAKE TX 76262						4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	, , , , , , , , , , , , , , , , , , ,					
(City)	(St	cate) (2	Zip)																	
		Table	e I - I	Non-Deriv	ative	Secu	ıritie	es Ac	qui	ired, Di	isposed	of, or I	3enefic	cially	Owne	d				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Ye			Year)	Execution Date,		ate,	Code (Instr		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			nd 5) Securit Benefic Owned		ies cially Following	Form (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
									Cod	le V	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)	
Class A Common Stock 08/25/202						0			M		10,000	A	\$1	.0	10	10,000		D		
Class A Common Stock 08/25/202					20	20			S	\sqcap	10,000	D	\$96.3	3582 ⁽¹⁾		0		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	ition Date,	4. Transa Code (8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Inst 3, 4 and 5)		Expiration (Month/Da			Amo Secu Undo Deriv Secu	7. Title and Amount of Securities Underlying Derivative Security (Instr 3 and 4)		Price of rivative curity str. 5)	9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	y 1	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)		oate Exercisable	Expiratio e Date	n Title	Amou or Numb of Share	er						
Director Stock Options (right to buy)	\$10	08/25/2020			M			10,000		(2)	04/26/202	Class A Stock	10,00	00	\$0	110,720)	D		

Explanation of Responses:

- 1. The price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$96.00 to \$96.54, inclusive. The reporting person undertakes to provide to the issuer, any security holder of the issuer, or the staff of the Securities and Exchange Commission, upon request, full information regarding the number of shares sold at each separate price within the range set forth in this footnote to this Form 4.
- 2. The shares subject to the option shall vest and become exercisable, subject to continued service, in 12 equal quarterly installments over the three (3) year period following the grant date; provided, that all shares subject to the option will vest and become exercisable upon a "change in control" (as defined in the issuer's omnibus incentive plan).

Remarks:

/s/ P. Ryan Langston, as Attorney-in-Fact for Mark **Miller**

08/27/2020

** 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.