FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

<i>N</i> ashington,	D.C.	20549	
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heck this box if no longer subject to
ection 16. Form 4 or Form 5
oligations may continue. See
etruction 1(h)

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

	OMB APPROVAL								
	OMB Number:	3235-0287							
	Estimated average burden								
ı	hours per response:	0.5							

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

Name and Address of Reporting Person* Moxley Michael Patrick					2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [GSHD]								Check	ionship of Reporting all applicable) Director Officer (give title		g Person(s) to Issue 10% Own Other (spe		/ner		
(Last) (First) (Middle) 1500 SOLANA BLVD BUILDING 4, SUITE 4500					3. Date of Earliest Transaction (Month/Day/Year) 11/12/2020								X	below) below) VP of Service Delivery						
(Street) WESTLAKE TX 76262 (City) (State) (Zip)					4. If	4. If Amendment, Date of Original Filed (Month/Day/Year)								Indiv ne) X	'					
		Tabl	e I - I	Non-Deriv	/ative	Sec	uritie	es A	cquir	ed, D	isposed o	of, or E	enefici	ally	Owned	d				
1. Title of Security (Instr. 3) 2. Transaction Date (Month/Day/Y				Execution Date,		,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 an			Benefic Owned		es ially Following	Forn (D) o	n: Direct or Indirect nstr. 4)	7. Nature of Indirect Beneficial Ownership			
							Code	v	Amount	(A) or (D)	Price		Reported Transaction(s) (Instr. 3 and 4)				(Instr. 4)			
Class B Common Stock 11/12/202)20	20			С		582	D \$			63,039		D				
Class A Common Stock 11/12/202)20	20			С		582	Α	\$0	37		7,719		D			
Class A Common Stock 11/12/202				020	20		S		582	D	\$120.04	20.048(1)		37,137		D				
		T	able								sposed of , converti				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)		4. Transaction Code (Instr. 8)		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exerc Expiration Day (Month/Day/)		ate	7. Title and Amount of Securities Underlying Derivative Securit (Instr. 3 and 4)		De Se (In	Price of trivative curity str. 5)	9. Number derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	e s illy	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)	
					Code	v	(A)	(D)	Date Exerc	isable	Expiration Date	Title	Amount or Number of Shares							
LLC Units in Goosehead Financial, LLC	\$0.0	11/12/2020			С			582	(2)	(2)	Class A Commo Stock			\$0	63,039		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 \$120.00 to \$120.20, 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. Each LLC Unit, together with a share of Class B Common Stock, may be converted by the holder into one share of Class A Common Stock at any time. The LLC units do not expire.

Remarks:

/s/ P. Ryan Langston, as Attorney-in-Fact for Michael Patrick Moxley

** Signature of Reporting Person Date

11/16/2020

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.