FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D	.C. 20549
---------------	-----------

Check this box if no longer subject
to Section 16. Form 4 or Form 5
obligations may continue. See
Instruction 1(b).

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL								
OMB Number: 3235-0287								
Estimated average burden								
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*						2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [GSHD]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)							
<u>Langston Patrick Ryan</u>						USEII	cau .	1115UI	ance,	<u> 111C</u>	<u>.</u> Г СЭПД	J		•	Direct	,	X	10% O	wner		
-																r (give title	y	Other (specify		
(Last)	`	,	Middle)			3. Date of Earliest Transaction (Month/Day/Year)								X Officer (give title X officer (spe below) VP and General Counsel / Member of					- f 100/		
1500 SOLANA BLVD						08/30/2021								VPa	ına Gei				01 10%		
BUILDI	NG 4, SUI												owner group								
(Street)		4. If a	4. If Amendment, Date of Original Filed (Month/Day/Year)									6. Individual or Joint/Group Filing (Check Applicable									
WESTL	AKE T	X 7	6262			Line) X Form filed by One Repo									orting Pers	on					
																•		ın One Rep			
(City)	(Si	tate) (2	Zip)												Perso	n					
	Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned																				
1. Title of S	Security (Ins	tr. 3)		2. Transact	tion		eemec		3.		4. Securitie				5. Amo				7. Nature		
				Date (Month/Day	y/Year)	Year) Execution Date, if any (Month/Day/Year)			` ` 		it (D) (In	str. 3, 4 a	and	Securities Beneficially		(D) or Indirect		of Indirect Beneficial			
														Report			(I) (II	(i) (Instr. 4)	Ownership (Instr. 4)		
						Code	v	Amount	(A) o (D)	Price			ction(s) 3 and 4)								
Class A Common Stock 08/30/20						021			М		0	A	\$	10	15,000			D			
Class A C	Common St	ock		08/30/2	2021)21			S		10,000	D	\$14	0.06	06 5,000 D						
Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned																					
				(e.g., pu	uts, c	alls,	warr	ants,	optio	ns,	convertib	le se	curitie	s)							
1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	if any	emed ion Date, /Day/Year)		ansaction ide (Instr.		5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		Exerction Day/N		7. Title and Amount of Securities Underlying Derivative Security (Instr. 3 and 4)		8. Price of Derivative Security (Instr. 5)		9. Number derivative Securities Beneficiall Owned Following Reported Transactio (Instr. 4)	ly D	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		
						v	(A) (D)		Date Exercisable		Expiration Date	Amou or Numb of Title Share		er							
Employee Stock Options (right to	\$10	08/30/2021			M			0	(1)		04/26/2028	Class A Stock	0.0		\$0	60,000		D			

Explanation of Responses:

1. One third (1/3rd) of the option, which represents the right to purchase a total of 120,000 shares, shall vest and become exercisable, subject to continued employment, on each of the second, third and fourth anniversaries of the grant date, which was April 26, 2018; provided, that all shares subject to the option will vest and become exercisable if Mr. Langston's employment is terminated without "cause" or for "good reason" (each as defined in either Mr. Langston's option award agreement or the issuer's omnibus incentive plan) within six month following a "change in control" (as defined in the issuer's omnibus incentive plan).

Remarks:

/s/ P. Ryan Langston

08/30/2021

** Signature of Reporting Person

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.