## FORM 4

obligations may continue. See

Instruction 1(b)

Check this box if no longer subject to Section 16. Form 4 or Form 5

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

<b>STATEMENT</b>	OF	<b>CHANGES</b>

OMB APPROVAL IN BENEFICIAL OWNERSHIP

OMB Number: 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

1. Name and Address of Reporting Person*  Mark & Robyn Jones Descendants Trust  2014						2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [ GSHD ]									all app Dired Offic	er (give title	g Perso X X	10% C	wner (specify	
	SEHEAD	INSURANCE, I				3. Date of Earliest Transaction (Month/Day/Year) 09/23/2019									belov Me	,	helow)  where group			
1500 SOLANA BLVD., BLDG 4, STE 4500  (Street)  WESTLAKE TX 76262  (City) (State) (Zip)					4. If <i>i</i>	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Indiv Line) X	′					
		Tabl	e I - No	on-Deriva	ative	Sec	uritie	s Acc	quired	, Dis	sposed o	f, or E	Benefi	cially	Owne	ed				
1. Title of Security (Instr. 3)  2. Transact Date (Month/Day					Execution Date		Date,	3. Transaction Code (Instr. 8)		4. Securities Acquired (A) of Disposed Of (D) (Instr. 3, 4			Secur Benef Owne	5. Amount of Securities Beneficially Owned Following Reported		ership Direct ndirect r. 4)	7. Nature of Indirect Beneficial Ownership			
									Code	v	Amount	(A) (D)	Pri	e	Trans	action(s) 3 and 4)			(Instr. 4)	
Class A C	ommon Sto	ock		09/23/2	2019				S		29,926	D	\$4	48.83 <sup>(1)</sup> 780,370 D						
Class A C	ommon Sto	ock		09/23/2	2019				S		16,062	D	\$4	\$49.52 <sup>(2)</sup> 764,308 D						
		Та	ıble II -								osed of, convertib				wned					
1. Title of Derivative Security (Instr. 3)	2. Conversion Date (Month/Day/Year) Price of Derivative Security  3. Transaction Date (Month/Day/Year)  3. Deemed Execution Date, if any (Month/Day/Year)		on Date, Day/Year)	4. Transad Code (II 8)		Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)		6. Date Exercisable and Expiration Date (Month/Day/Year)  Date Expiration Exercisable Date			7. Title and Amount of Securities Underlying Derivative Security (Instr. and 4)  Amoun or Numbe of		Deri Secu (Inst	rice of vative urity tr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction (Instr. 4)	Own For Dire or II (I) (I	nership m: ect (D) ndirect Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)		

## **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 \$48.31 to \$49.31, 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 price reported in Column 4 is a weighted average price. These shares were sold in multiple transactions at prices ranging from \$49.32 to \$49.80, 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.

## Remarks:

The sales reported were effected pursuant to a Rule 10b5-1 trading plan adopted by the reporting person.

/s/ P. Ryan Langston, as Attorney-in-Fact for Mark & Robyn Jones Descendants

09/25/2019

Trust 2014

\*\* 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.