### 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 averag | ge burden |  |  |  |  |  |  |  |
|                  |           |  |  |  |  |  |  |  |

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*  Jones Mark Evan  (Last) (First) (Middle)  C/O GOOSEHEAD INSURANCE, INC.  1500 SOLANA BLVD., BUILDING 4, STE 4500  (Street)  WESTLAKE TX 76262  (City) (State) (Zip) |   |                                    |  |                                   | 3. E<br>07/                   | 2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [ GSHD ]  3. Date of Earliest Transaction (Month/Day/Year) 07/08/2019  4. If Amendment, Date of Original Filed (Month/Day/Year) |    |   |            |   |        |               |                        |  | S. Relationship of Reporting Person(s) to Issuer (Check all applicable)     X Director X 10% Owner     X Officer (give title X Other (specify below)     CEO / Member of 10% owner group      6. Individual or Joint/Group Filing (Check Applicable Line)     X Form filed by One Reporting Person     Form filed by More than One Reporting Person |   |                                   |   |  |  |  |
|---|---|------------------------------------|--|-----------------------------------|-------------------------------|---|----|---|------------|---|--------|---------------|------------------------|--|---|---|-----------------------------------|---|--|--|--|
| Table I - Non-Deriva  1. Title of Security (Instr. 3)  2. Transaction Date (Month/Day/Ye  |   |                                    |  | on                                | 2A. Deemed<br>Execution Date, |   | э, | 3.<br>Transaction<br>Code (Instr.<br>8) |            | 4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and  |        |               |                        | 5. Amoun<br>Securities<br>Beneficia<br>Owned Fo<br>Reported  | t of<br>S   | 6. Ownership<br>Form: Direct<br>(D) or Indirect<br>(I) (Instr. 4) |                                   | 7. Nature of<br>Indirect<br>Beneficial<br>Ownership<br>(Instr. 4) |  |  |  |
|   |   |                                    |  |                                   |                               |   |    |   | Code V     |   | Amount | (A) or<br>(D) | Price                  |  | Transaction(s)<br>(Instr. 3 and 4)  |   |                                   |   | ` ′  |  |  |
| Class A Common Stock 07/08/201  |   |                                    |  |                                   | 19                            | 9   |    |   | S          |   | 19,909 | D             | \$48.26 <sup>(1)</sup> |  | 1,250,830   |   | I                                 |   | By Mark<br>and Robyn<br>Jones<br>Descendants<br>Trust 2014 |  |  |
| Class A Common Stock 07/08/2019   |   |                                    |  | 19                                | 9                             |   |    | S                                       |            | 100   | D      | \$48.96       |                        | 1,250,730  |   | I   |                                   | By Mark<br>and Robyn<br>Jones<br>Descendants<br>Trust 2014        |  |  |  |
| Class A C   | ommon Sto   | ock <sup>(2)</sup>                 |  |                                   |                               |   |    |   |            |   |        |               |                        |  | 749,  | 317   |                                   | D   |  |  |  |
|   | Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned  (e.g., puts, calls, warrants, options, convertible securities) |                                    |  |                                   |                               |   |    |   |            |   |        |               |                        |  |   |   |                                   |   |  |  |  |
| Security or Exercise (Month/Day/Year) if any  |   | eemed<br>tion Date,<br>h/Day/Year) |  | Transaction<br>Code (Instr.<br>8) |                               | f erivative ecurities cquired () or isposed f (D) nstr. 3, 4 nd 5)  |    | ration  <br>hth/Day                     | Expiration | 7. Title and<br>Amount of<br>Securities<br>Underlying<br>Derivative<br>Security (Instr.<br>and 4)  Amoun<br>or<br>Numbe<br>of<br>Title Shares |        | -             |                        | 9. Number of<br>derivative<br>Securities<br>Beneficially<br>Owned<br>Following<br>Reported<br>Transaction(s)<br>(Instr. 4) |   | 10.<br>Ownersh<br>Form:<br>Direct (D<br>or Indirec<br>(I) (Instr. | Beneficial Ownership t (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 \$47.88 to \$48.81, 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. This does not reflect shares directly held by the reporting person's spouse, who is independently a reporting person of the issuer.

#### Remarks:

The sales reported were effected pursuant to a Rule 10b5-1 trading plan adopted by the Mark and Robyn Jones Descendants Trust 2014.

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

07/09/2019

**Evan Jones** 

\*\* 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.