FORM 4

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

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

| Washington, | D.C. | 20549 |
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Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

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

| | | | | | or Se | ection 30(h) of th | e inves | tment | Company Act | of 1940 | | | | | | | | |
|---|---|--|---|-----------|---|---|--------------|--|-------------|---|--|---|------------------------------------|---|---|--|------------|--|
| 1. Name and Address of Reporting Person* Monte & Palerty Jones Descendents Trust | | | | | 2. Issuer Name and Ticker or Trading Symbol Goosehead Insurance, Inc. [GSHD] | | | | | | 5. Relationship of Reporting Person(s) to Issuer (Check all applicable) | | | | | | | |
| Mark & Robyn Jones Descendants Trust | | | | | | | | | | , | | | Direct | or | X | 10% C |)wner | |
| <u>2014</u> | | | | | | | | | | | | | | r (give title | X | Other below) | (specify | |
| (Last) (First) (Middle) | | | | | | 3. Date of Earliest Transaction (Month/Day/Year) 01/07/2020 | | | | | | below) A below) Member of 10% owner group | | | | | | |
| C/O GOO | OSEHEAD | INSURANCE, I | NC. | | | | | | | | | | | | | | | |
| 1500 SOLANA BLVD., BLDG 4, STE 4500 | | | | | 4. If A | 4. If Amendment, Date of Original Filed (Month/Day/Year) | | | | | | 6. Individual or Joint/Group Filing (Check Applicable | | | | | | |
| (Street) WESTLAKE TX 76262 | | | | | | | | | | | Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person | | | | | | | |
| (City) | (St | ate) (| Zip) | | | | | | | | | | 1 0130 | ,,,, | | | | |
| | | Tabl | e I - N | lon-Deriv | ative S | Securities A | cquir | ed, C | Disposed o | of, or E | Benefic | ially O | wne | d | | | | |
| 1. Title of Security (Instr. 3) 2. Transactio Date (Month/Day/N | | | Execution Date, | | 3. Transaction Code (Instr. 8) 4. Securities Acquired (A) of (D) (Instr. 3, 4) | | | | 5) S | 5. Amount of Securities Beneficially Owned Following Reported | | 6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4) | | 7. Nature of Indirect Beneficial Ownership (Instr. 4) | | | | |
| | | | | | | | Code | v | Amount | (A) or (D) | Price | 1 | Transaction(s) (Instr. 3 and 4) | | | | (111501.4) | |
| Class A C | Common Sto | ock | | 01/07/20 |)20 | | S | | 13,900 | D | \$44.61 | 4.6125 ⁽¹⁾ 134,381 D | | | | | | |
| | | Та | ble II | | | curities Acc lls, warrant | | | | | | | ned | | | | | |
| 1. Title of Derivative Security (Instr. 3) | 2. Conversion or Exercise Price of Derivative Security | ercise (Month/Day/Year) of ative | 3A. Deemed Execution Date, if any (Month/Day/Year) | | 4. Transacti Code (Ins 8) | | Expi (Mor | 6. Date Exercisable and Expiration Date (Month/Day/Year) | | | and it of ties ying tive ty (Instr. 3 | 8. Price Deriva Securi (Instr. | vative irity r. 5) | 9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s (Instr. 4) | Ownership Form: Direct (D) or Indirect (I) (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 \$44.19 to \$45.02, 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.

Date

Exercisable

(D)

Expiration

Title

Date

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 Trust 2014

Amount

Shares

01/07/2020

** 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).

Code

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.