SEC Form 4	
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## 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 STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP

OMB APPROVAL
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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*			2. Issuer Name <b>and</b> Ticker or Trading Symbol Goosehead Insurance, Inc. [GSHD]	5. Relationship of Reporting Person(s) to Issuer (Check all applicable)				
Moxley Michael Patrick					Director	10% Owner		
				X	Officer (give title	Other (specify		
(Last) (F	(First) (Middle)		3. Date of Earliest Transaction (Month/Day/Year)		below)	below)		
	,	induit)	05/18/2021		VP of Service De	elivery		
1500 SOLANA BLY	VD							
BUILDING 4, SUIT	TE 4500							
			4. If Amendment, Date of Original Filed (Month/Day/Year)	6 Indiv	vidual or Joint/Group Filing	(Check Applicable		
				Line)	induction control choup it ming	(encour pphotoic		
(Street)				X	Form filed by One Report	rting Person		
WESTLAKE T	X 7	6262				÷		
,					Form filed by More than Person	One Reporting		
	Stata) (7	Zin)						
(City) (S	State) (Z	Zip)						

## Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transa Code ( 8)			4. Securities Acquired (A) or Disposed Of (D) (Instr. 3, 4 and 5)		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	Transaction(s) (Instr. 3 and 4)		(1130.4)
Class B Common Stock	05/18/2021		С		2,000	D	\$ <mark>0</mark>	59,871	D	
Class A Common Stock	05/18/2021		С		2,000	A	\$ <mark>0</mark>	39,137	D	
Class A Common Stock	05/18/2021		S		2,000	D	\$85.9648(1)	37,137	D	

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

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. Transa Code ( 8)		of Deri Secu Acq (A) o Disp of (E	oosed D) tr. 3, 4	Expiration Date (Month/Day/Year) S		Amount of		8. Price of Derivative Security (Instr. 5)	9. Number of derivative Securities Beneficially Owned Following Reported Transaction(s) (Instr. 4)	10. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	11. Nature of Indirect Beneficial Ownership (Instr. 4)
				Code	v	(A)	(D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares				
LLC Units in Goosehead Financial, LLC	\$0.0	05/18/2021		С			2,000	(2)	(2)	Class A Common Stock	2,000	\$0	59,871	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 \$85.62 to \$86.13, 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:

## <u>/s/ P. Ryan Langston, as</u> <u>Attorney-in-Fact for Michael</u>

Patrick Moxley

\*\* Signature of Reporting Person Date

05/19/2021

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.